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Intimate partner violence as embedded in communities: Using INC theory to understand the influence of social network members on victim-survivor's commitment to an abusive relationship partner

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Intimate partner violence as embedded in communities: Using INC theory to understand the influence of social network members on victim-survivor's commitment to an abusive relationship partner

by

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Dedication

This thesis is dedicated to the many people who have been harmed by abusers. My hope is that this work will be a small part of helping your support networks better meet your needs. You deserve it.

Acknowledgments

I want to acknowledge the many people who helped me to complete this project. First, to the participants in this study who trusted me with their stories. I am immensely grateful for your generosity and your trust. Thank you. To my partner, Ryan, who has supported me in pursuing what I love, thank you. Thank you for encouraging me, partnering with me in life, and wrangling our children so that I could complete this important project in the midst of a global pandemic. Thank you to Ashlynn and August, you make long days of reading, writing and thinking about difficult things better. To my advisor, Dr. René Dailey, thank you for your guidance, encouragement, and the fastest turnaround on edits a person could ever hope for. You have taught me so much over the course of this project and my studies. To my reader, Dr. Erin Donovan, thank you for your helpful insights and direction. Your guidance has made this project so much better. To all of the faculty members who were a part of my education at this important beginning of what I hope is a long career, particularly Drs. Anita Vangelisti, Matthew McGlone, and Jeffrey Treem, thank you for helping me to develop the knowledge and skills necessary for completing this project. Thank you for challenging me to develop as a scholar. Finally, to my classmates and friends who engaged with me on this project, particularly Chelsea, Kyle, Carly, and Drew, our conversations served as the foundation of this project and were vital in its continued development. I am grateful for your friendship and access to your brilliant minds.

Abstract

Intimate partner violence as embedded in communities: Using INC theory to understand the influence of social network members on victim-survivor's commitment to an abusive relationship partner

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Abstract: Intimate partner violence represents a significant public health challenge. A plethora of research has investigated victim-survivors' choices to stay or leave abusive relationships, including the documented influence of their close social networks. Less consideration, however, has been given to the communication processes and patterns that are involved in interactions between victim-survivors and their support partners and how those specific patterns might influence victim-survivors' choices about their relationships. The present investigation tests the helpfulness of Inconsistent Nurturing as Control (INC) theory (Le Poire, 1995) to better understand these communication patterns and their potential influence. Findings indicate that the INC theory framework is appropriate and helpful when applied in this new context. Previous INC theory findings were replicated, but new strategies emerged. In this new context, minimizing the abuse and indirect or direct

support for the abusive partner or relationship were commonly used reinforcing behaviors, while new punishing behaviors included offering unsolicited advice. Reinforcing alternatives was the most effective strategy, including functional partners encouraging seeking professional help and various forms of enacted social support. When extended beyond immediate family relationships to include victim-survivors' broader social networks, including extended family members and close friends, the INC theory framework recontextualizes IPV and the choices victim-survivors make within their relationships as phenomena that are embedded within communities, opening the door to new opportunities for intervention and new strategies for providing social support.

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Chapter 1: Introduction

Intimate partner violence (IPV) is a pervasive and serious problem in America. The Centers for Disease Control and Prevention reports nearly one in five women and about one in seven men have experienced severe physical violence at the hands of an intimate partner in their lifetime (Smith et al., 2017). Sexual violence perpetrated by an intimate partner is nearly as common, with one in five women and one in twelve men reporting the experience. The report indicates a startlingly high number of men and women have also experienced psychological aggression, defined as expressive aggression (such as name calling, insulting or humiliating an intimate partner) and coercive control, which includes behaviors that are intended to monitor and control or threaten an intimate partner. Nearly half of American women (47.1%) and men (47.3%) report experiencing this type of abuse by an intimate partner (Smith et al.). Trans- and non-binary identifying people report even higher rates of IPV. The *2015 U.S. Transgender Survey* found that 54% of trans and non-binary identifying people said they had experienced some form of IPV, including acts involving coercive control and physical harm (James et al., 2016).

The ubiquity of IPV constitutes a significant public health challenge. As a result of IPV, 27.4% of women and 11% of men reported having experienced significant harmful impacts, such as (but not limited to) post-traumatic stress disorders, injury, need for medical care, and sexually transmitted diseases (Smith et al., 2017). Despite this increased need for care, women who are abused are twice as likely to report an unmet medical need even when controlling for access to care and socio-demographic variables (Plichta & Falik,

2001). In general, the risk of experiencing poor physical health is doubled by being in an abusive relationship, even when controlling for socioeconomic status and related variables (Plichta, 2004). Children whose mothers are the victim-survivors[1] of IPV are at an increased risk of future IPV victimization or perpetration (Insetta et al., 2015), as well as a host of mental, physical, and behavioral health problems (Bensley, Eenwyk, Simmons, Van Eenwyk, & Simmons, 2003). These outcomes are particularly alarming because more than half of female IPV victim-survivors have children in the home (Greenfeld, 1998).

While it is common to question victim-survivors' choices regarding their relationships, the role family and friends of victim-survivors play in these important decisions should also be considered. Health communication research has long focused on the role of third parties in effectively supporting or influencing individuals to make healthier choices or discontinue a destructive health behavior (Britton, Haddad, & Derrick, 2019; Derrick, Wittkower, & Pierce, 2019; Pachucki, Jacques, & Christakis, 2011). In the context of IPV, victim-survivors have reported that family and friends' responses, as well as the availability of their support systems, have a significant influence on decisions regarding their commitment to a relationship with an abusive partner (Copp, Giordano, Longmore, & Manning, 2015), but little is known about the communication processes and patterns that are involved in interactions between victim-survivors and their support

[1] While debate over use of "victim" or "survivor" in discussions of IPV continues, the researcher chooses to use the term "victim-survivor" very intentionally. "Victim-survivor" recognizes the harsh reality that not all who are victimized have the privilege of also becoming survivors and requires the reader to recognize that those who have experienced IPV may personally identify with one or both.

partners, or how those specific patterns might influence victim-survivors' choices. Applying Inconsistent Nurturing as Control (INC) theory (Le Poire, 1995) to analyze conversations about victim-survivors' relationships with abusive partners is an important first step in understanding these communication patterns and their potential influence. Recognizing that victim-survivors do not make choices about their relationships in a vacuum, understanding the ways in which those closest to victim-survivors reinforce or discourage their commitment to the relationship will provide helpful insights for social network members desiring to more effectively provide needed support.

Inconsistent Nurturing as Control (INC) theory has been a helpful framework in the health communication field utilized to understand the relationship dynamics, as well as communication patterns and their associated health outcomes, in relationships where one member engages in addictive or compulsive problematic health behaviors. A recent study (Dalgleish Hazlett, 2019) suggests the INC theory framework can be applied to and provide helpful insights into conversations between victim-survivors of IPV and their close friends and family members where the network member's goal is to encourage the victim-survivor to disengage from a destructive relationship with an abusive partner. This research consisted of both survey responses and in-depth, semi-structured interviews with ten close friends or family members of victim-survivors who are either currently or were previously engaged in a relationship characterized by intimate partner violence. Survey and interview questions will gather data on communication patterns and relationship dynamics within the

relationship, as well as the friend or family member's knowledge of relationship outcomes and violence and control within the abusive relationship.

The knowledge gained in this study will inform future interventions that capitalize on the documented influence of victim-survivor's friends and family members. By understanding the mechanisms by which communication patterns influence a victim-survivor's commitment to their abusive relationship partner, practitioners can develop evidence-based strategies to share with friends and family members who need guidance.

Chapter 2: Literature Review

INTIMATE PARTNER VIOLENCE

Intimate partner violence (IPV) includes "physical violence, sexual violence, stalking and psychological aggression (including coercive tactics) by a current or former intimate partner (i.e., spouse, boyfriend/girlfriend, dating partner, or ongoing sexual partner)" (Smith et al., 2017). IPV can be perpetrated by both men and women and is found at similar rates in both heterosexual and same-sex relationships (Jose & O'Leary, 2009; Murray & Mobley, 2009; Smith et al., 2017; Stiles-Shields & Carroll, 2015). Researchers have identified different types of intimate partner violence using a variety of approaches, including those based on the form of abuse, differentiating between physical, sexual, and psychological violence, as well as the type of violence, determined by patterns of behavior within the relationship over time (Ali, Dhingra, & McGarry, 2016). While no single group of typologies is universally accepted as the standard, a working knowledge of the general differences between major types of IPV is essential in research that examines IPV-related experiences or interactions, particularly when the goal is to develop successful interventions that protect, rather than endanger, victim-survivors of IPV.

Johnson's (2008) typologies of IPV were the first to explore the interaction between violence perpetration and high or low control perpetration in relationships with male abusers and female victim-survivors. The results of his research produced four unique forms of IPV. Intimate Terrorism (IT), which Johnson (2017) more recently re-termed as

"coercive controlling violence," refers to relationships in which one partner is highly violent and controlling, but the other is not (Johnson, 2008). Research indicates that within heterosexual relationships, IT is perpetrated primarily by men (Johnson, 2010). Violent Resistance (VR) describes relationships in which one partner is highly violent and controlling and the other partner is violent, but not controlling (Johnson, 2008). VR is most often seen in women "entrapped in a relationship with an intimate terrorist" who fights back (Johnson, 2010, p. 213). Situational Couple Violence (SCV) refers to relationships in which conflict between relationship partners escalates to violence with either one or both partners, but there is no desire for control on the part of either partner. Finally, Mutual Violent Control describes relationships in which both relationship partners are violent and controlling.

Frankland and Brown's (2014) research on coercive control in same-sex relationships was the first to consider the presence of control in the absence of violence, expanding Johnson's typologies to include Nonviolent Control, where a relational partner exhibits highly controlling behaviors without enacting violence. Most recently, Mennicke's (Mennicke, 2019) cluster analysis of secondary data found support for both Johnson (2008) and Frankland and Brown's (2014) categories, but expanded to include additional control-related categories, confirming that IPV characteristics (e.g., control perpetration, control victimization, violence perpetration, and violence victimization) cluster into high/low patterns (see Figure 1).

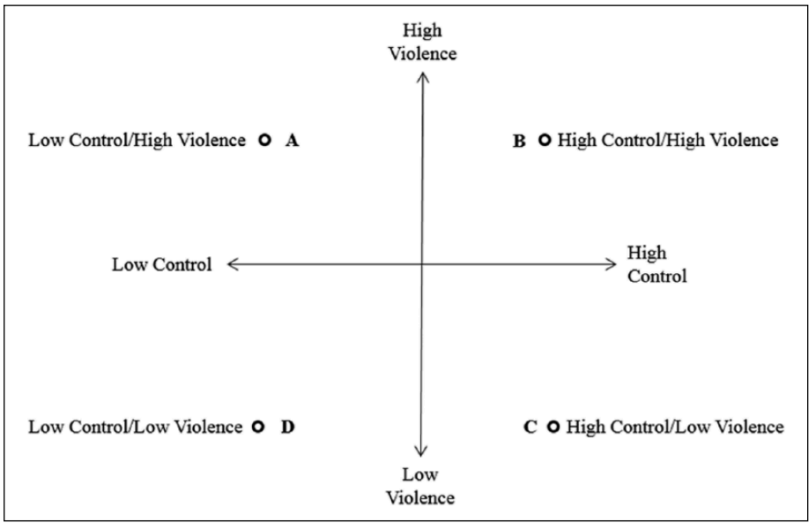


Figure 1: Conceptual model for the interaction between violent behaviors and controlling behaviors for one partner (Mennicke, 2019).

Mennicke (2019) argued that "centralizing the element of control in research on IPV" (p. 396) is necessary for recognizing IPV that is perpetrated primarily through power and control, rather than physical or sexual violence, and for understanding the changing nature of relationships characterized by IPV. Researchers have found that in some abusive relationships, minimal physical violence is necessary because once violence has been enacted, the threat of future violence is enough to establish and maintain domination and control within the relationship (Mennicke, 2019). Further, controlling behavior is significantly less obvious to outsiders in comparison to physical or sexual violence, yet it is a greater predictor of extreme physical, sexual, and fatal violence than the presence of a prior assault (Beck & Raghavan, 2010). A large, 11-city study showed that for cohabitating

couples, the level of control in the abusive relationship increased the risk of a fatality post-separation by a factor of nine (Glass, Manganello, & Campbell, 2004). As such, developing interventions that are either specific to these high-risk relationships or can be applied universally without endangering any specific sub-set of IPV victim-survivors is essential.

THE ROLE OF SOCIAL NETWORKS

For many victim-survivors of IPV, their closest friends and family may be their greatest potential source of support. Farrow (1997) found that victim-survivors' informal social networks were vital, reporting that network members were "closer to, more trusted by, and more frequently available" (p. 22) to victim-survivors than formal services such as law enforcement, shelters, and mental health professionals. Victim-survivors of IPV also report the social support provided by informal network members was more successful than formal supports in meeting the long-term needs that facilitated the end of their abusive relationships (L. Kelly, Bindel, Burton, Butterworth, & Cook, 1999; Sylaska & Edwards, 2014; Wilcox, 2000). Unfortunately, victim-survivors also report that negative (Liang, Goodman, Tummala-Narra, & Weintraub, 2005) and mixed responses by social network members are common (Latta & Goodman, 2011; Trotter & Allen, 2009; Uchino, Holt-Lunstad, Smith, & Bloor, 2004).

Across multiple studies, victim-survivors have reported that members of their informal networks often became frustrated with them and have minimized or avoided the topic of the abuse, leading to the derogation of their relationship (Goodkind, Gillum,

Bybee, & Sullivan, 2003; Mitchell & Hodson, 1983; Moe, 2007; Renzetti, 1988; Trotter & Allen, 2009; Weisz, Tolman, Callahan, Saunders, & Black, 2007). Within a shelter population, Moe (2007) found that victim-survivors felt abandoned by their social supports more often than they reported having received assistance. Another study focused on a rural-based population reported the phenomena of victim-survivors receiving help with strings attached. Victim-survivors reported they were asked to tolerate the abuse and provide domestic-related services to their informal network members in exchange for receiving their social support (Bosch & Bergen, 2006).

The responses of social network members are often impacted by the risks associated with their proximity to their loved one's abusive relationship, and they report a myriad of negative impacts on their own lives (Gregory, Williamson, & Feder, 2017). Riger, Raja, and Camacho (2002) found that IPV's consequences extended through the "web of relationships" (p. 185) that contextualize victim-survivors' daily lives. Informal support providers report experiencing physical health impacts such as fatigue and exhaustion (Latta, 2008), negative impacts on their psychological well-being, including trauma (Hardesty, Oswald, Khaw, Fonseca, & Chung, 2008), shock (Latta, 2008), depression and PTSD symptoms (Sigurvinsdottir, Riger, & Ullman, 2016), and fear (Hardesty et al., 2008; McNamara, 2008), as well as direct impacts, including threats and physical violence enacted by the perpetrator (Hobart, 2002; Salari, 2007). In fact, while protective orders have been shown to reduce an IPV victim-survivor's risk of assault by their abusive partner, their friends and family members often become the abuser's focus, resulting in an increased

risk to social networks of victim-survivors post-protective order (Wolf, Holt, Kernic, & Rivara, 2000). In one study, the threat to safety was a potential issue for anyone who was part of a victim-survivor's social network, from friends and family to co-workers and neighbors (Gregory et al., 2017).

Given the documented harmful impacts, it is no surprise that friends and family members of victim-survivors of IPV report struggling to know how best to respond. Several researchers have explored the interactions between victim-survivors and members of their social networks to better understand how responses to victim-survivors are formulated. Peled, Gueta, and Sander-Almoznino's (2016) research on the experience of Israeli mothers exposed to their daughter's IPV victimization found that mothers transitioned through four semi-chronological phases of interaction with their daughters. In the first phase, known as the pre-disclosure phase, the mother does not yet know but may suspect that her daughter is in an abusive relationship. In this phase, many mothers report being cautiously silent about the matter, waiting for clear evidence. The second phase reported was the definitive encounter in which mothers became aware of their daughter's abusive relationship, either by witnessing the violence themselves or through disclosure from their daughter or a third party. The third phase involved "living with continued exposure" to their daughter's IPV victimization. In this phase, mothers report a variety of passive and active responses, including directly challenging their daughter's abusive partner and both distancing themselves emotionally and completely disengaging. The final phase was only

reported by a portion of the mothers as it involved the aftermath of the relationship when their daughter had left.

Latta and Goodman's (2011) grounded theory exploration of interventions in abusive relationships found that survivors' informal support networks report moving through three primary stages in the process of determining how to engage or disengage with a victim-survivor. The first stage entails the process in which social network members become aware that the victim-survivor's relationship is abusive. The second stage involves network members gathering information about the abusive relationship and in the final stage, the network member chooses to act to intervene in some way (or not). Latta and Goodman present the process as fluid and non-linear, with network members moving through the process many times and utilizing a variety of different interaction strategies throughout the length of their friend or family member's abusive relationship. Participants in this research often reported feeling ill-equipped to help their loved ones. Latta and Goodman specifically addressed this gap in knowledge as an important opportunity. Research has shown that network members have significant influence on victim-survivor's decisions about the course of their relationships (Copp et al., 2015) and public awareness campaigns that educate network members on their important role and provide strategies for successful communication could potentially save and improve the lives of victim-survivors, as well as their extended families and networks.

DECISIONS TO STAY OR LEAVE

Various studies have attempted to explain the process by which a victim-survivor decides to stay or leave a relationship with an abusive partner. Research has shown that these decisions are impacted not only by the behavior of the victim-survivor's abusive partner, but by the options available to victim-survivors, the ways in which their social networks respond, and other individual factors (Rhodes & McKenzie, 1998; Strube & Barbour, 1983). The costs associated with leaving have consistently been reported as the source of seemingly insurmountable barriers for many abused women (Bauserman & Arias, 1992; Rusbult & Martz, 1995; Strube, 1988; Truman-Schram, Cann, Calhoun, & Vanwallendael, 2000). Others have applied the investment model to these decisions (Rhatigan & Axsom, 2006; Rusbult & Martz, 1995), finding that emotional and psychological variables play an important role in stay or leave decisions. Women who reported higher exposure to psychological abuse, lesser relationship satisfaction, greater access to desirable alternatives to the relationship, and fewer long-term investments in the relationship and their partner also reported lesser commitment to their abusive relationships (Rhatigan & Axsom, 2006). This research indicates that the process by which victim-survivors determine commitment to their relationships is similar to non-battered women's processes, but because commitment does not necessarily predict the choice to stay or leave, particularly if victim-survivors fear for their safety or lack alternatives, it is important to understand other factors which may influence these decisions.

Sandberg (2016) argues that victim-survivor's responses to IPV, including their decisions to stay or leave, are "co-constructed in a wider social network" (p.444) where, in spite of the isolation many victim-survivors experience as a result of the abuse, their social networks are often aware of the IPV (Klein, 2012). Goodman and Smyth (L. A. Goodman & Smyth, 2011) argue that responses to IPV "need to be understood not only as a matter between two individuals but as something involving both formal and informal social networks, and always occurring in a community context" (summarized by Sandberg, 2016, p. 445). Indeed, research has repeatedly shown that the personal resources of victim-survivors, including economic (Reisenhofer & Taft, 2013) and psychological resources (Baly, 2010; Reisenhofer & Taft, 2013), as well as social influences, including the availability of formal and informal social support (Panchanadeswaran & McCloskey, 2007) impact their decisions to stay or leave their abusive relationships. More available social support has been shown to increase a victim-survivor's likelihood of leaving, while negative help-seeking experiences are linked to a decrease (Reisenhofer & Taft, 2013).

An application of the Theory of Reasoned Action (TRA) (Fishbein & Ajzen, 1975) to understand commitment in abusive relationships provides some important insights into some of the ways victim-survivors' social networks impact their decisions (Etcheverry & Agnew, 2004). Within the context of intimate relationships, subjective norms refer to a relationship members' beliefs about what others think about his or her relationship. Subjective norms have been shown to be an important factor in predicting relationship commitment in the general population (Etcheverry & Agnew, 2004; Etcheverry, Le, &

Charania, 2008), as well as in relationships containing IPV (Shorey, Tirone, Nathanson, Handsel, & Rhatigan, 2013). In relationships characterized by IPV specifically, subjective norms have been linked to a victim-survivor's Stage of Change in Relationship Status (SOCRS) (Handsel, Ritter, Moore, & Rhatigan, 2012). The SCORS is a measure developed to determine victim-survivors' placement within an adapted Transtheoretical Model of Change (TTM) (Prochaska & Velicer, 1997), specific to IPV relationships which outlines five primary stages in terminating an abusive relationship (Handsel et al., 2012). The first two stages include precontemplation, when relationship members feel no need to change anything in their relationship, and contemplation, when a relationship member begins to think about ending the relationship in the next six months. The final three stages include preparation, when victim-survivors begin to discuss leaving with others, action, when they tell their partner they are ending the relationship, and maintenance, which includes rebuffing the partner's attempts to reinstate the relationship. It is in the first two stages of pre-contemplation and contemplation, that subjective norms have been shown to have the greatest impact and where victim-survivor's social network members are likely to be the most influential (Shorey et al., 2013). Knowing when social network members are most influential is helpful, but there remains much to understand about how that influence occurs and how network members can best utilize their influence to encourage positive outcomes for victim-survivors.

The responses of social network members, including the many who report feeling powerless and unqualified to help, will likely impact victim-survivor's well-being and their

relationship outcomes. While much of the research on victim-survivors' stay/leave decisions has taken an individualistic perspective, this study will add to the growing body of literature that explores IPV as embedded within a community. It is clear that victim-survivors' choices are influenced by their social networks. Inconsistent Nurturing as Control (INC) theory may provide a helpful framework for understanding how that influence occurs and informing public health campaigns that target victim-survivor's social support systems, guiding them in how to best utilize their influence to support victim-survivors to decrease their commitment to an abusive relationship partner and potentially disengage from the relationship altogether.

Chapter 3: Rationale

Although INC theory has been used to understand the relationship dynamics, communication patterns, and resulting health behavior outcomes in relationships where one member suffers from addiction, there is reason to believe it can be applied in the context of relationships between victim-survivors of IPV and their close friends and family. Findings of this application could provide vital information useful for the development of public health campaigns that teach effective communication strategies to those with the greatest access to and influence on victim-survivors. Before exploring the application of INC theory in this new context, it is necessary to first review the basic tenets of INC theory and its previous applications.

INCONSISTENT NURTURING AS CONTROL THEORY

Inconsistent Nurturing as Control (INC) theory (Le Poire, 1992, 1995) describes the process by which individuals in close relationships seek to influence a relationship partner to decrease destructive health behaviors. INC theory posits that the paradoxical nature of the relationship, in which the person who is engaged in dysfunctional behavior holds most of the power in the relationship, leads the functional partner to attempt to use both nurturing and punishment as means to control the afflicted partner's undesirable behavior. In this process, the functional relationship partner ultimately utilizes inconsistent messages, intermittently punishing and then reinforcing the destructive behavior, which inadvertently lead to an increase in the behavior. Thus far, INC theory has been applied to

relationships where afflicted partners are engaged in drug (Le Poire, Hallett, & Erlandson, 2000), alcohol (Glowacki, 2016, 2017) and general substance abuse (Duggan, Dailey, & Le Poire, 2008; Glowacki & Donovan, 2018; Glowacki, 2013), sex addiction (Wright, 2008; 2011), depression (Duggan, 2007; Duggan & Le Poire, 2006; Duggan, Le Poire, & Addis, 2006), and disordered eating (Prescott & Le Poire, 2002).

INC theory outlines three distinct phases of interaction between the functional and afflicted partner, each characterized by the use of different communication patterns. In the first stage, known as the pre-labeling phase, the functional partner may reinforce the behavior through encouragement or participation in the behavior. In previous INC theory research, reinforcing behaviors have included drinking with the alcoholic relationship partner or avoiding conversations about the problematic behavior (Glowacki, 2016). Labeling, understood as the point in which a functional partner becomes aware that the afflicted partner's behavior is destructive and labels it as such, is foundational for delineating between the three distinct phases. Once the destructive behavior is labeled as problematic, the second phase of interaction begins. The post-labeling phase predicts a shift in the functional partner's strategies, focusing on the use of punishing behaviors in an effort to control the afflicted relationship partner's behavior. Punishing behaviors include direct confrontation (Glowacki, 2017), public or private shaming, and arguing with the partner about the behavior (Le Poire, 1995). In the final phase of post-frustration, the afflicted partner either rejects the functional partner's attempts to discourage their destructive behavior or relapses back into the destructive behavior. In response, functional partners

begin to alternate between messages of punishment and reinforcement, as they attempt to both control the behavior of the afflicted partner and nurture and maintain the relationship simultaneously. INC theory, based on the tenets of behaviorism (Skinner, 1974), posits that functional partners' intermittent punishment and reinforcement unintentionally strengthens the undesirable behavior. The most successful outcomes result from functional partners who consistently punish the afflicted partner for their problematic behavior while also reinforcing alternative behaviors such as encouraging the afflicted partner to attend rehab or a support group for addicts (Duggan, Le Poire, Prescott, & Baham, 2009). In these instances, previous research has shown that afflicted partners are significantly less likely to relapse into their previously destructive behavior (Le Poire et al., 2000). Consistent punishment, however, has also been shown to be detrimental.

Applying Inconsistent Nurturing as Control theory to intimate partner violence

The current research extends INC theory to the domain of intimate partner violence. Interestingly, Duggan, LePoire, Prescott, and Baham (2009) have previously explored a theoretical application of INC theory in the context of intimate partner violence, but rather than recognizing the victim-survivor of IPV as the afflicted partner, they assign this classification to the abuser. This approach may be helpful in relationships characterized by situational couple violence (SCV) (Johnson, 2008), where violence may be bi-directional and is *not* coupled with control behaviors. With SCV, partners' behavior may escalate to

violence, but neither partner attempts to exert power and control over the other, allowing for opportunities to challenge and punish behavior that are not afforded to victim-survivors of coercive controlling violence (Johnson, 2008; Johnson & Leone, 2005; J. B. Kelly & Johnson, 2008).

With the goal of developing new intervention methods that could be helpful across a range of IPV typologies, this research will focus on third parties, specifically close friends and family members, whose interaction behaviors shape and influence victim-survivors' commitment to their abusive relationship partners and decisions to remain in or return to these relationships (i.e., the undesirable behavior). Applying INC theory in this context could provide helpful insights for developing successful communication strategies for informal social network members to utilize in their interactions with victim-survivors and may also help to explain *why* certain strategies are more successful than others.

Previous research in the field of IPV indicates there are several important similarities between IPV and other contexts in which INC theory has been applied. First, the presence of trauma bonds (Dutton & Painter, 1993; Scheffer Lindgren & Renck, 2008) makes commitment to an abusive relationship partner similar to other types of addictions and compulsive behaviors used in previous INC theory research. Second, the distinct phases of interaction outlined in INC theory bear strong resemblance to the models of interaction identified in IPV research focused on interactions between victim-survivors and members of their social networks (Handsel et al., 2012; Prochaska & Velicer, 1997; Shorey et al., 2013). Finally, the functional-afflicted relationship dynamic outlined in other INC

theory applications can also be found in relationships between victim-survivors of IPV and their close friends and family members.

The Undesirable Behavior

Commitment to an abusive relationship partner, while different from substance abuse, disordered eating, sex addiction, and depression, can also be understood as a compulsive or addictive behavior. Research has shown that leaving an abusive relationship may be more of a process than a decision made at one moment in time (Anderson & Saunders, 2003; Burke, Gielen, McDonnell, O'Campo, & Maman, 2001; Enander & Holmberg, 2008) and many victim-survivors report leaving and subsequently returning to their abusive relationship multiple times (Bell, Goodman, & Dutton, 2007; Horton & Johnson, 1993; Merritt-Gray & Wuest, 1995; Moss, Pitula, Campbell, & Halstead, 1997) or engaging in unsuccessful attempts to end the relationship (Gondolf & Fisher, 1988; L. Goodman, Dutton, Weinfurt, & Cook, 2003). The process of leaving, according to Enander and Holmberg (2008), is complicated by the presence of the "traumatic bond" (p. 206), which psychologically ties victim-survivors to their abusers. This bond consists of emotional ties, including love, fear, hate, compassion, guilt and hope, and composite ties, including the desire to understand, dependency, and internalization. These ties make the process of leaving extremely difficult and may serve as "(part of) an explanation for the immense power" abusers hold over their victim-survivors (p. 208). Trauma researchers have found the traumatic bond, developed out of intermittent patterns of abuse and

reinforcement, are intensely difficult to break (Dutton & Painter, 1993; Herman, 2015). Indeed, research has found that half of all women residing in a domestic violence shelter are likely to return to their partners (Strube, 1988).

For victim-survivors of IPV, their choices are often limited by a multitude of factors outside of their control, including the actions of their abusive partners and access to helpful resources (Rhodes & McKenzie, 1998; Strube & Barbour, 1983), but research shows that a victim-survivor's commitment to their abusive relationship partner, often impacted by the presence of a trauma bond, is influenced by those closest to them (Etcheverry & Agnew, 2004; Etcheverry et al., 2008; Shorey et al., 2013). INC theory provides a unique framework for understanding victim-survivor's commitment as both compulsive and addictive, as well as an area of potential influence where social network members who care about the victim-survivor can take strategic action to influence the victim-survivor's commitment to the relationship.

Phases of Interaction & Patterns of Communication

Multiple studies have shown support for the possible presence of the distinct phases of interaction in INC theory, as well as the use of punishing and reinforcing strategies. Previous research focusing on interactions between social network members and victim-survivors has found patterns that bear strong similarity to those outlined in INC theory (Latta & Goodman, 2011; Peled et al., 2016). While these studies do not present phases that are identical to those identified in INC theory, they include INC theory's "labeling" as

a key aspect of the interaction processes they attempt to explain and recognize differences in interactions before and after labeling occurs. The distinct changes in communication strategies as they are outlined in INC theory were not addressed in this previous research, but across studies, informal network members reported enacting a variety of strategies, often times conflicting, as they cycled through stages (sometimes multiple times). This research suggests that distinct phases of interaction and associated patterns of communication outlined in INC theory may also be present in interactions between victim-survivors and their informal social network members.

Functional-Afflicted Relationship Dynamic

According to INC theory, a unique power paradox is central to the dynamic between functional and afflicted partners (Le Poire, 1992). This dynamic is characterized by an exchange of control between the codependent (functional) partner and the dependent (afflicted) partner. On the surface, it appears the codependent (functional) partner is in control, but the destructive behavior of the dependent (afflicted) partner actually constrains the codependent partner's behavior in significant ways, often impacting their daily lives. As codependent (functional) partners are required to accommodate the harmful behavior of the dependent (afflicted) partner (often in order to preserve the relationship), they experience a loss of control. Attempts to regain control lead the codependent (functional partner) to utilize intermittent nurturing and punishment as a means of maintaining the nurturing nature of the relationship and to attempt to simultaneously regain control of the

situation. The dependent (afflicted) partner then finds themselves in a position of power, where they can decide whether or not to comply with the codependent (functional) partner's request to end the behavior (Le Poire, 1992). This power dynamic is important because it is central to why functional and afflicted partners behave in particular ways over time and predicts the success of failure of certain strategies.

INC theory has been applied primarily within voluntary relationships such as romantic pairs (Duggan, 2007; Duggan et al., 2008; Duggan, Le Poire, & Addis, 2006; Duggan & Le Poire, 2006; Glowacki & Donovan, 2018; Glowacki, 2013; Le Poire, 1995; Le Poire et al., 2000; Wright, 2008, 2011a), but it has also been applied in the context of involuntary familial relationships such as mother and daughter (Prescott & Le Poire, 2002), parent and child (Glowacki, 2016), and between siblings (Glowacki, 2017). To date, it does not appear to have been applied within the context of close friendships. This research will apply the INC theory framework with both voluntary and involuntary relationships, expanding to include close friends as well as family members of victim-survivors.

Victim-survivors report that they are more likely to seek support from friends and family members than formal supports like law enforcement or domestic violence shelters (Sylaska & Edwards, 2014). A wide variety of victim-survivors reported friends as their most likely and most helpful source of support, including high school students reporting IPV (Ashley & Foshee, 2005; Black, Tolman, Callahan, Saunders, & Weisz, 2008; Molidor & Tolman, 1998), college women (Dunham & Senn, 2000; Edwards, Dardis, & Gidycz, 2012), older women (Flicker et al., 2011), lesbian women (Renzetti, 1988; Turell &

Herrmann, 2008), and gay men (McClennen, Summers, & Vaughan, 2002; Merrill & Wolfe, 2000). A combination of family and friends were reported as most helpful for women victim-survivors of physical IPV (Mahlstedt & Keeny, 1993), women in a domestic violence shelter population (Moe, 2007), and urban women victim-survivors of IPV (Rose, Campbell, & Kub, 2000). As a source of social support, friends and family provide both practical and emotional support to victim-survivors, contributing significantly to the emotional well-being (Adkins & Kamp Dush, 2010; Coker, Watkins, Smith, & Brandt, 2003) and physical safety (Bybee & Sullivan, 2005; L. Goodman, Dutton, Vankos, & Weinfurt, 2005) of victim-survivors.

While research on the centrality of victim-survivors' social networks point to the importance of including close friends as participants in the present research, findings from a preliminary study (Dalgleish Hazlett, 2019) suggest INC theory may offer a possible way to conceptualize the influence of victim-survivors' close friends and family on their decisions, as well as the relationship dynamics resulting from the victim-survivor's commitment to the abusive relationship. Undergraduate communication students from a large university in the southwestern United States (n = 82) and individuals recruited through a Facebook page advocating for legal reform of intimate partner violence laws in the United States (n = 20) responded to an online survey with details of the nature of their relationship to a victim-survivor who was either a close friend or family member, the victim-survivor's relationship, and communication patterns with the victim-survivor. Participant ages ranged from eighteen to 25, with an average age of 19.66 (SD = 1.26) and

the two groups were analyzed collectively. All participants indicated they could recall a time in which they labeled their friend or family member's commitment to an abusive relationship as problematic. There was also evidence friends and family members frequently utilized punishing strategies, while fewer reported the use of reinforcing behaviors. Given the findings of this study and significant evidence of the centrality of social networks in victim-survivor's daily lives, exploring this application within the context of victim-survivor's broader social networks, not just their family members, may be fruitful in providing helpful insights for network-focused interventions.

THE CURRENT RESEARCH

The current research will further explore the application of INC theory in the context of conversations about abusive relationships by engaging in semi-structured interviews with friends and family members of people who have been or are currently engaged in intimate relationships with abusive partners. A better understanding of the means by which victim-survivors of IPV are influenced could be particularly helpful for developing future communication-based interventions. If INC Theory has similar predictive power when applied to interactions between IPV victim-survivors and their close friends and family members, its application in this context will provide important insights for developing public health campaigns that engage victim-survivor's social networks.

Research in the field of IPV indicates that commitment to an abusive relationship partner is often compulsive and disengaging from a relationship with an abusive partner is

difficult and may require multiple attempts at leaving before the victim-survivor is successful (Bell et al., 2007; Horton & Johnson, 1993; Merritt-Gray & Wuest, 1995; Moss et al., 1997). It is also clear that IPV victim-survivors' responses to abuse and their commitment to an abusive relationship partner are impacted by their informal social networks (Etcheverry & Agnew, 2004; Etcheverry et al., 2008; Shorey et al., 2013). Previous research has explored how social network members make decisions about how to interact with victim-survivors in their lives, but the presence of each of the distinct phases of interaction outlined in INC theory is yet to be established. Dalgleish Hazlett's (2019) research using an undergraduate student sample showed evidence for the presence of these three phases, with overwhelming evidence of "labeling" as an important and distinct step, but the current research will look to confirm this finding. Additionally, research exploring the responses of victim-survivors' social networks have shown a variety of strategies utilized by informal network members, including those which INC theory would classify as reinforcing and punishing.

In their extension of INC theory to explore sibling relationships, Glowacki (2017) suggests that reinforcing behaviors within different relationship contexts ought to be conceived of differently, as strategies amongst siblings differ from those found in previous applications involving romantic partners. Research has shown that romantic relationships have a functionally different relationship dynamic than sibling relationships because management of competing goals requires a regular exchange of both sacrifice and self-care (Duggan et al., 2008), a tension not necessarily present in sibling relationships. Research

has recognized this dynamic within close friendships as well. Hays' (Hays, 1985) longitudinal study examining the development of friendships found that as friends become closer, they often increased rewarding behaviors. During that same time period costs to partners increased slightly as well, suggesting that as relational closeness and interdependence increased, friends also required sacrifice of some sort from the other. As such, the current research will seek to explore reinforcing, punishing, and reinforcing alternatives strategies between victim-survivors and both friends and family members, with the goal of understanding their use within the distinct phases proposed by INC theory. The following inquiry is proposed:

RQ1: Are functional partners able to recall and describe the moments at which they labeled the afflicted partner's relationship as problematic (with regard to IPV)?

RQ2: How do functional partners describe reinforcing behavior?

RQ3: How functional partners describe punishing behaviors?

RQ4: How do functional partners describe reinforcing alternatives?

INC theory predicts that functional partners will shift their strategies across the pre-labeling, post-labeling, and post-frustration stages. Application of this framework to the current context must take into account how functional partners describe using differing strategies over time and if those changes over time mirror the trajectory predicted by previous INC theory research.

RQ5: How do functional partners describe their interactions with afflicted partners across the three different stages in INC theory?

Of additional importance, research indicates some of the behaviors considered as punishment within the INC theory framework may result in isolation of the victim-survivor. Isolation includes both social isolation, which, in the context of IPV, can be understood as either lacking access to a social support system (Lanier & Maume, 2009), or physical isolation, which involves actual physical distance from social networks (Stark, 2009). Because isolation of any sort can have devastating consequences to the victim-survivor, as it often leads to an increase in the violence and control experienced in their relationships (Stark), maintaining relationships with victim-survivors should be a priority for those who care most about them.

Both punishing and rewarding strategies can lead to isolation. For example, when victims have reached out to potential supports, some victims report that members of their informal network become frustrated with them (*punishing*), minimize the abuse (*reinforcing*), or avoid the topic of the abuse (*reinforcing*), leading to the derogation of their relationship (Goodkind et al., 2003; Mitchell, R. E. & Hodson, 1983; Moe, 2007; Renzetti, 1988; Trotter & Allen, 2009; Weisz, Tolman, Callahan, Saunders, & Black, 2007). The victim may also choose to distance themselves from their network as a protective strategy (Latta & Goodman, 2011). Victim-survivors have commonly reported

a desire to keep their personal matters private, feeling shame or embarrassment, as well as fears regarding responses to an IPV disclosure (Edwards et al., 2012; Mahlstedt & Keeny, 1993; Swanberg & Macke, 2006; Walters, 2011). This pro-active response from victim-survivors may be in response to previous conversations where undesirable strategies were utilized by their close friends and family members. Recognizing that isolation can result from both the actions of the functional partner, as well as the response of the afflicted partner to an undesirable strategy, this research will also attempt to identify which strategies utilized by functional partners result in isolation of the victim-survivor.

RQ6: Which strategies utilized by functional partners led to isolation of the afflicted partner?

The primary goal of this research is to better understand the means by victim-survivors of intimate partner violence are influenced by their social networks. While it is not necessarily the responsibility of victim-survivors' friends and family members to convince them to leave an abusive relationship, this knowledge will aid in producing useful, data-driven intervention strategies for close friends and family members of people engaged in relationships with abusive partners who struggle to know how to respond appropriately in these situations. The most effective interventions must consider both the potential for creating social and physical isolation and the influence of the intervening person on desired outcomes. INC theory provides a helpful framework for taking both of

these important factors into account as close friends and family members intervene to support someone they care about to disengage from an abusive relationship partner.

Chapter 4: Methods

The current study will employ a qualitative, theory-driven approach to examining how the communication patterns utilized by victim-survivor's close friends and family members in conversations about their abusive relationship impact their commitment to the relationship with the abuser. Given that the co-dependent relational dynamics between functional and afflicted partners are recognized as a central tenet of INC theory, this dynamic will also be explored. The following sections describe the study's research design, participants and recruitment, and procedures for data collection and analysis.

RESEARCH DESIGN

This research employs an interpretive, constructivist perspective that recognizes that "knowledge, truth, reality, and goodness are relative to a specific theoretical framework, form of life, or culture" (Kvale, 1995, p. 23), rejecting the notion that truth is an objective, independent, and observable construct. Interpretive qualitative researchers utilize a *verstehen* approach, which emphasizes the importance of empathy and developing an understanding of a participant's particular view of the world. As such, knowledge and reality are socially constructed and embedded. They are "viewed as a 'text' that can be read, interpreted, and analyzed" (Tracy, 2020, p. 51) rather than something to be "discovered or measured" (p. 51).

Guided by the overarching desire to understand intimate partner violence as an ecological, rather than an individual, or even dyadic, phenomenon, this research utilizes

INC theory to explore how communication patterns between victim-survivors and their friends and family members impact and influence victim-survivors' commitment to an abusive relationship partner. The research design consists of both survey data and in-depth interviews, allowing the researcher to explore the questions posed in this study with more depth, breadth, and complexity. Because observing or recording multiple conversations that occur over an extended period of time cannot easily happen in real time, data collected via survey and in-depth interviews provide an opportunity for participants to retrospectively examine their interactions and offer their own interpretation of events and experiences. In-depth interviews allow the researcher to explore experiences and events "too time-consuming or too private to observe" (Frey, Botan, Friedman, & Kreps, 1992, p. 285) and to attain "thick description" (Geertz, 1973) of participant's experiences, providing the opportunity to develop meaningful and complex understandings of the phenomenon in question.

PARTICIPANTS & RECRUITMENT

The University of Texas at Austin Institutional Review Board (IRB) approval was obtained before any recruitment efforts were made (see Appendix A for IRB approval letter). The researcher, having previously worked in victim-survivor advocacy locally and at a national level, utilized existing connections with domestic violence advocates and primary prevention educators, as well as advocacy groups and community organizations with a robust social media presence to recruit close friends and family members of

victim-survivors of IPV. Participants were also recruited through the researcher's own personal social media accounts. Fliers used in recruitment included details about the study, including its purpose, the researcher's contact information, and instructions for setting up an interview with the researcher (see Appendix B for recruitment language). Eligibility for the study required that participants be (a) be over the age of eighteen and (b) have previous experience supporting a close friend or family member who is currently or was involved in a relationship in which their intimate partner was abusive to the friend or family member. Initially, participants were required to have had experience in the previous two years. After months of recruitment efforts that produced relatively few eligible participants, the researcher expanded the eligibility parameters of the study to include those with *any* previous experience supporting a close friend or family member involved in a relationship in which their intimate partner was abusive. For the purposes of this study, potential participants were informed that an abusive relationship constitutes any intimate relationship in which there is ongoing and/or repeated instances of coercive control, physical, emotional, psychological, sexual or economic abuse by one partner against the other.

In the midst of recruitment for this research, the COVID-19 pandemic hit the United States. Several months later, when multiple instances of extreme police brutality and murder were reported in the United States in May and June of 2020, a national conversation about anti-black racism and white supremacy rightfully became a focus of increased attention, public protest, and social unrest. Recruitment efforts were

significantly stalled during this period. In the end, a sample of ten participants were recruited and completed both the survey and interview portions of the study. Nine participants self-identified as women (90%), while one identified as a man (10%). Participant ages ranged from 23 to 63 (M = 36.1 years). Eight participants were White/Caucasian (80%), one was Asian (10%), and one self-identified as mixed race (10%). Five of the ten (50%) participants reported they had previous experience in an abusive relationship of their own. Five participants reported that they were close friends of the victim-survivor (50%), while five reported they were family, three of which were siblings (30%), one of which was a parent (10%), and one of which was a cousin (10%). Only one participant (10%) had any relationship with the abusive partner, which was described as a friendship.

Data were also collected on the abusive relationship itself. The average age of the participant's friend or family member at the onset of their relationship with an abusive partner was 24.4 years (*range* = 19 – 31 years). Of the close friends and family members who were in a relationship with an abusive partner, participants reported that seven were women (70%) and three were men (30%). The abusive partners in these relationships were majority men (n = 9), with only one of the abusive partners identified by participants as a woman (10%). Nine of the close friends or family members were reportedly in a heterosexual relationship (90%) and one was in a same-sex relationship (10%). Three of the participants' close friend or family members were still in the abusive relationship (30%), while seven had ended the relationship (70%) at the time of the study.

Of those three ongoing relationships, two had been intact for less than two years, while one reportedly had been ongoing for six years. Of the seven which had ended, two had lasted for a period of less than two years, one had lasted for three years, and three had lasted for seven or more years (*range* = 7 – 13 years).

According to participants, all but one of the victim-survivors (n = 9) had explicitly expressed a desire to leave their relationship at some point and all but two of the victim-survivors (n = 8) had actually attempted to leave the relationship unsuccessfully at some point. In a follow-up survey question, participants reported they were aware of anywhere from one to eight unsuccessful attempts at ending the relationships, with the most common being two unsuccessful attempts.

DATA COLLECTION

Data were obtained through completion of an online survey questionnaire and a technology-mediated interview. The first page of the online survey included informed consent language. Participants were asked to acknowledge receipt of this information and indicated their consent to participate in the study by choosing to continue to the following page and begin answering questions (see Appendix C for informed consent language). Survey questions asked basic demographic information about participants, the victim-survivor, and the victim-survivor's relationship with the abuser. Recognizing that participants' knowledge of abuse within their friend or family member's relationship could potentially influence their interaction strategies, questions were also asked about the

participant's knowledge of abuse in the victim-survivor's relationship (see Appendix D for survey questions). Questions about the abusive relationship were developed by adapting the Checklist for Controlling Behaviors (CCB) (Lehmann, Simmons, & Pillai, 2012) to ask about the participant's knowledge of the victim-survivor's relationship, rather than the respondent's own relationship. The CCB contains ten sub-scales focusing on varying types of relationship abuse, including physical abuse, sexual abuse, emotional abuse, economic abuse, intimidation, threats, minimizing or denying, blaming, isolation, and privilege. Respondents were asked to indicate where they have either witnessed or been told about abuse within the victim's relationship, as well as report on any knowledge of bi-directional abuse, where both partners engaged in harmful behavior toward the other. Relationship information collected also included the length of the close friend or family member's abusive relationship and the current state of the relationship (terminated or continuing). While some of this information may have also been discussed during in-depth interviews, survey responses allowed for greater breadth of knowledge about the relationship abuse that may not naturally arise in the interview process.

After answering survey questions, participants completed a technology-mediated interview. Interviews were conducted between January and June 2020 and lasted an average of 47 minutes and 23 seconds (*range*: 31:04 – 1:08:29). Consistent with Rubin and Rubin's (2005) guidelines for conducting responsive interviews, rich data were collected using semi-structured questions and probes that elicited meaning, processes, and experiences to answer the research questions outlined in Chapter 2. At the beginning of

each interview, the researcher introduced themselves to the participants and shared a bit about their own experience and reasons for conducting the current research. Participants were informed they had the option to skip any questions and were provided with information where they could seek support upon completion of the survey or at any point in which they choose to end the interview (see Appendix F for support language).

Questions were developed utilizing the literature and theories discussed in Chapters 2 and 3 and elicited discussions on their communication and interaction patterns with the victim-survivor, the process of labeling a victim-survivor's continued commitment to the relationship as problematic, and description of the relationship dynamics present in the participant's relationship to the victim-survivor. Although questions were developed with INC theory in mind, additional questions, probes, and follow-up questions were included to ensure participant responses were not constrained by any preexisting concepts or ideas about their experiences. Although the standard protocol was utilized, questions varied slightly in both order and content from participant to participant. For example, over the course of conducting interviews and as analysis began, the data pointed to family dynamics as an emerging influence within the context of these important conversations. As such, the researcher began specifically asking about the types of messages other family members or friends might be sharing with victim-survivors in their own discussions about the relationship and if those messages conflicted with the messages of the participant. Follow-up questions and probes were added to collect additional and specific information that was not applicable to all participants. All interviews were recorded and transcribed.

DATA ANALYSIS

A phronetic iterative approach (Tracy, 2018) was utilized for exploring the proposed research questions. Unlike a grounded theory approach (Glaser & Strauss, 1967), which derives meaning entirely from emergent data, a phronetic iterative approach focuses more narrowly on aspects of the data which "have the potential to extend specific theories or address practical problems" (p. 62), alternating between existing questions and theory and emerging qualitative findings. With this approach, existing questions and theory serve as "sensitizing concepts" (Bowen, 2006), focusing the analysis process, but the approach is not bound by them.

Coding and Themes

Analysis began in conjunction with the data collection progress. I conducted informal analyses of transcripts using open coding and through the use of memo writing (Tracy, 2020), which allowed adjustment to the interview protocol where necessary. Several questions were added over the course of data collection, including those which specifically asked about the responses of other members of the victim-survivors' social support network, an emerging theme from early data collection. Later interview protocols gave this element additional attention. Once analysis failed to produce new emerging information, in line with requirements for saturation, I concluded data collection.

Using Tracy's (2018) phronetic, iterative approach to data analysis and after completion of data collection, I reviewed a selected subset of transcripts line-by-line, using

descriptive primary cycle coding (Tracy, 2018), which sets aside a priori questions or purposes. This produced a start list of 144 initial codes, some of which had similarities and overlapped. Analytic memos, which serve as "sites of conversation with ourselves about our data" (Clarke, 2005) provided helpful space for considering emerging themes developing through primary cycle coding and aided in the development of higher level codes used for secondary-cycle coding (Tracy, 2020).

In secondary-cycle coding, researchers interpret, organize, and synthesize codes with theoretical considerations in mind (Tracy, 2018, p. 66). From the 144 initial codes, higher level codes were developed. In the process of research design, a preliminary codebook (see Appendix G) had been created with codes related to INC theory's communication strategies and phases of communication. These codes, developed to inform research questions and the interview process, were developed using both previous INC theory research and literature exploring the responses victim-survivors of intimate partner violence have reported in interactions with their informal social support networks (Latta & Goodman, 2011; Sylaska & Edwards, 2014). Analysis of emerging themes from the primary cycle coding process indicated that all of the pre-determined codes from the original codebook mirrored themes that had also emerged from this phase of coding. As such, these pre-determined codes were kept and expanded upon, while new higher level codes were developed to encompass additional themes which emerged from the data. For secondary-cycle coding, all transcribed interviews were analyzed. Transcripts were read

line-by-line and coded using these higher-level codes. In this process, no additional higher-level codes emerged (see Appendix H for final codebook).

My Role as Researcher

Charmaz (Charmaz, 2016) warns that when interviewing, "unearned trust elicits silence, not stories of lived experience" (p. 45). Heeding this warning, I made attempts to establish trust between myself and participants prior to and during the interview process. It helped that I personally knew some of the participants and in other cases, participants were referred to the study through friends and family members who could vouch for me. I found that shared experience served as a helpful means of establishing trust between myself and the participants in this study and aided in my ability to relate to the experiences of interviewees. I began each interview by explaining my motivation and reasoning for this investigation, engaging in explicit conversation about the empathy I experienced for both victim-survivors and the difficult and stressful experiences of those closest to them. I explained that this empathy resulted from personal experience. Participants were encouraged to interrupt, re-direct, or ignore any questions throughout the interaction, as the goal was to best understand their experience, on their terms. Participants were also asked if they had a preferred pseudonym for use in reporting the findings of this study. Where a preference was indicated, that preferred pseudonym is used. In all other cases, pseudonyms were created by myself to protect the identities of both participants and their close friends

and/or family members whose lives and relationships were the subject of interest in this research.

My own previous experience with the subject of this investigation influenced my approach to this work in the data analysis process as well. I knew IRB requirements for ethically sharing the experiences of my participants, but struggled to determine what additional personal ethical boundaries were appropriate. Having personally witnessed the sensationalism that often accompanies stories of abuse, I wondered how much detail of the victim-survivor's abuse felt appropriate to share within the context of this particular investigation. I wondered how ethical it was to share the stories of victim-survivors as they were told through the lens of another person's experience. Ultimately, I came to the decision that details of the abuse would be shared only as they were necessary for answering the research questions at hand and only as they were necessary for explaining the behaviors of the participant themselves.

Chapter 5: Results & Discussion

The goal of this research was to investigate the communication patterns involved in interactions between people in relationships with their abusive partners and their close friends or family and how those patterns change during the abusive relationship. In examining these patterns, we can begin to understand how those patterns might influence victim-survivors' choices. In order to understand these processes, close friends or family members of victim-survivors first completed a short online survey that measured their knowledge of abuse within their friend or family members' abusive relationship. Participants then completed an in-depth interview which asked them to describe specific aspects of their interactions in terms described in INC theory, including moments at which they labeled the victim-survivor's relationship as problematic (RQ1), behaviors that reinforce the victim-survivor's commitment to the abusive relationship (RQ2), behaviors that punish the victim-survivor for their sustained commitment to the abusive relationship (RQ3), paying special attention to which strategies resulted in isolation of the victim-survivor (RQ6), and ways in which they reinforced alternative behaviors (RQ4). Because INC theory predicts a specific pattern of behavior, participants were also asked to describe interactions across the three different stages of pre-labeling, post-labeling, and post-frustration (RQ5).

LABELING (RQ1)

Labeling the afflicted partner's destructive health behavior as problematic is a central step within the INC theory framework because it serves as the boundary between the pre-labeling and post-labeling phases where functional partners' communication behaviors often dramatically shift. In the pre-labeling phase, functional partners most often engage in reinforcing behaviors, where they unknowingly encourage the harmful behavior as a result of not yet realizing the behavior is problematic. Consistent with previous INC theory investigations, all ten participants identified a time at which they individually labeled their close friend or family member's involvement in their romantic relationship as problematic. Research in the intimate partner violence field has shown that victim-survivor's social network members become aware of the violence their friend or family member is experiencing by either witnessing the violence themselves or being told about the violence in either a survivor or network-member initiated conversation (Latta & Goodman, 2011). Participants in the present investigation reported these same events precipitating their labeling moment.

Most commonly, participants labeled the victim-survivor's commitment to the relationship a concern as a result of having been told by the victim-survivor themselves that something abusive had occurred. Elise reported realizing her sister's relationship was concerning about a year in, when her sister reached out directly to her after a tense visit in which the family had been introduced to her abusive partner for the first time:

> She just broke down and told me everything that had gone wrong… or most of everything that's gone wrong. She was still coming to terms with that herself. So yeah, it was kind of like a confession because she had felt so bad about it and I think she felt bad for hiding it.

Similarly, Anita, whose close friend was beginning an abusive relationship as she was leaving one herself, recounts that after a series of "constantly cancelled" plans, the victim-survivor "started to confide in me about how bad it was." It was then that she saw the parallels between her abusive relationship experience and her friend's situation and knew the relationship was a problem.

Nathan was the only participant who initiated the conversation that led to his labeling. He asked his victim-survivor friend directly if her cheating husband had been psychologically abusive and when she confirmed, he then asked if he had been physically abusive to her. Nathan's previous experience studying abuse helped him to see the warning signs of abuse, but directly asking and receiving confirmation served as important markers that guided his future response to a friend in need.

Other participants personally witnessed behavior they found to be abusive in nature and then labeled the relationship as problematic. For example, Sarah, reported that she had had previous concerns that her friend's relationship was "very controlling" and knew the couple engaged in frequent conflict, the harmful nature of the relationship became most clear when her close friend of eight years created a secret email account where he asked her to direct any communication with him. Sarah reported feeling alarmed by the request:

> I knew that this was going to be problematic when he told me… that she tried to break into his phone a lot and so don't text him. And also, that I shouldn't send messages on Facebook or email him and he decided to set up a totally separate private account that she didn't know about on a totally different website so that if he wanted to be in touch with me, we could talk that way. …If you have to cover your tracks so much and be dishonest about just the people that you're friends with… that to me seems so controlling.

Barbara, whose younger sister had been dating a guy she met while away at college, recounted witnessing the abusive partner's anger while the couple were in town visiting family for Thanksgiving:

> They were going somewhere and my Grandma and I were going to see my Great Aunt and we ended up at a stoplight behind them and they were fighting and I could see she was driving and he was mad about something. I saw him start hitting the dashboard and like inches from her face he was screaming at her. That night, we were sharing a bed at my Grandma's house and I was like, "there's nothing stopping him from hitting you" and she was like, "no, he would never do that." And I, you know, I didn't have any experience at that point with abusive relationships. That wasn't something that I had seen before but in that instant I saw his rage and I was like, there's nothing that's going to stop him. He will end up hitting you. It was at that moment that I absolutely knew something was wrong.

These findings are consistent with previous INC theory research, indicating that within the context of conversations about intimate partner violence, labeling can serve as a helpful construct for understanding significant shifts in communication behaviors.

Several participants pointed to social network responses as having been meaningful in their process of labeling, indicating that one network member may have realized the relationship was problematic well before others did. Charlotte discussed early warning signs that her grandmother recognized, but other family members dismissed:

> They moved in together and my grandma came and my sister was really worried that someone had moved a stack of books that they had. My grandma pulled my Mom aside and said, "this is a weird thing" and we all just kind of brushed it off because she also didn't like him and we were like "woah, Grandma… you hold a grudge, just like relax," because we all have been really trying to get on board.

It was later, after a failed reconciliation following infidelity on the part of her sister's abusive partner, that Charlotte realized the gravity of the situation and labeled the relationship problematic herself:

> …she found out he was still talking to the girl [with whom he had had an affair]. So, she told him she wanted to leave and he told her she couldn't. And so, when he told her that she wasn't allowed to leave, that's when I got scared.

The discrepancy in timing between Charlotte's family and her grandmother in recognizing the problem may present another inconsistency with the potential to reinforce the afflicted partner's harmful behavior. Indeed, Charlotte later alludes to another inconsistency between timing of her own labeling, which led her to do a significant amount of research on abusive relationship dynamics and seek assistance from an outside expert, and her parents:

> They were on board, trying to forgive [him], trying to reconcile… I was getting information and then I was trying to talk to my parents about it and trying to explain it to them. My Mom was actually talking to [him] during that time and so that was kind of confusing. …I think [my sister] knew about my Mom and that made her feel like she had to stay longer.

Duggan and Kilmartin's (Duggan & Kilmartin, 2016) investigation of inconsistent strategy use within a family where a daughter struggled with disordered eating found that INC theory could be helpful for understanding the impacts of inconsistencies in messages

by both individuals across labeling stages (i.e. from pre-labeling to post-labeling) and across family members (i.e., Mom nurtures while Dad is punishing), but did not specifically address differences in timing related to movement from the pre-label stage to the post-label stage. This finding suggests that inconsistency in social network members' transitions across labeling phases may be another means by which reinforcement of the detrimental health behavior occurs.

COMMUNICATION STRATEGIES

INC theory is an appropriate framework for exploring communication patterns between victim-survivors and their close friends and family members in conversations about the victim-survivor's commitment to the abusive relationship partner, but given that the present investigation explores conversations in multiple types of relational contexts, considerations for how strategies may conceptually differ within varying relationship types should apply to these findings. In this new context, reinforcing, punishing, and reinforcing alternative strategies largely mirror previous descriptions, but there are important differences that make this application of INC theory unique from previous applications.

Reinforcing Behavior (RQ2)

INC theory applications have defined reinforcing behaviors as those communicative behaviors on the part of the functional partner which validate or reinforce the harmful behavior of the afflicted relationship partner. In the present investigation, descriptions of reinforcing behavior replicated previous findings and new strategies

emerged from the data. Interviewees described enacting multiple reinforcing strategies, avoidance of the topic, taking on responsibilities, minimizing the abusive behavior, and indirect or direct support for the abusive partner or relationship.

Avoidance of the Topic

Glowacki (2017) found that avoidance of the topic of the destructive health behavior was functionally different than avoidance of the afflicted person and as such, could function as reinforcement. Participant descriptions in the present study aligned avoidance of the topic of the abusive relationship with reinforcement as well. Concerns about how the victim-survivor might respond and a desire to help the victim-survivor retain face were the primary motivators reported for this response. Sarah, for example, recounted that before labeling her friend's relationship as problematic, she had determined "it's not my business." As she witnessed more overt behaviors on the part of the abusive partner, she recalled strategically avoiding discussion of the behavior: "I don't want to just sound like I think your partner's kind of rude and nasty towards you sometimes. …You might notice behaviors, but you start off minding your own business."

With sibling relationships, Glowacki (2017) also found that reinforcement may occur in less intense ways through the use of subtle hints, rather than direct confrontation, which is recognized as a punishing strategy. This trend was also found amongst both sibling and friend participants. Barbara recalled using this strategy with her sister: "I would try to just make comments here and there trying to… plant seeds in her head." Emily also

reported using this strategy with her close friend who had broken up and then returned to his abusive boyfriend multiple times. After one fight in which both her friend and his partner were physically abusive to each other and temporarily ended the relationship, Emily recalled making a sarcastic joke with her friend, asking him "was this really the last straw or are you going to start dating again next week?" This finding suggests that the intensity with which various strategies may be used is a factor that impacts the manifestation of strategies for both friend and sibling relationships.

Taking on Responsibilities

One participant described taking on a responsibility for the victim-survivor in her life. Rachel recalled that she had taken on the responsibility of providing emotional support for her Aunt, the victim-survivor's mother, because "this other person is so self-absorbed that they cannot see the perspective of someone else, even other people who are worried about them." Rachel found herself responsible for talking with her Aunt about the victim-survivor's situation and responding to her emotional needs, an experience she says was frustrating and made her feel that she had lost control over the situation.

In previous INC theory applications, taking on responsibilities for the afflicted partner has been a documented reinforcing strategy. For some, that included taking on household responsibilities (Le Poire et al., 2000) for the afflicted partner. The present application may be less likely to involve functional and afflicted relationship partners who live in the same household or are solely dependent on each other, as many victim-

survivor's live with their partners or in separate households from their friend or family member. Accordingly, participants did not report utilizing this particular strategy often. Of importance, however, CDC findings from a nationally representative sample of children under the age of 18 indicate that 1 in 15 children will be exposed to IPV in their lifetimes. While taking on care for children did not arise as a strategy used amongst the limited pool of participants in this investigation, many victim-survivors have children and this may be a strategy more widely used in the general population of victim-survivors.

Minimizing the Abuse

Several participants reported conversations with the victim-survivor in which they discussed (and at times, debated) whether certain events they had witnessed or been told about by the victim-survivor were abusive or appropriate. These sorts of questions and conversations were frequent in the pre-labeling phase and often led to functional partners inadvertently downplaying the severity of the situation to the victim-survivor, a strategy that served to reinforce the victim-survivor's commitment to the abusive relationship. Danielle, whose close friend had told her that her then boyfriend was looking through her texts and social media messages remembered having a conversation with her friend about whether his behavior was appropriate. The two disagreed, but at the time, nothing more serious had occurred yet in the relationship and Danielle had not yet determined the situation was problematic.

For Danielle, however, these sorts of conversations continued beyond the pre-labeling phase. Once she had labeled her friend's commitment to the relationship as problematic, her continued questioning of the abusive behavior, and failure to recognize the risk it posed, served to inadvertently reinforce her friend's commitment to the relationship. Danielle described continuing to question whether the situation was severe enough for her friend to leave, even after episodes of anger in which the partner had destroyed shared property, including wedding portraits, and used coercive and controlling behavior, including threatening suicide in front of the couple's son. After an incident in which the victim-survivor feared her partner would pick their son up from daycare before the victim-survivor could, Danielle recognized the behavior as an attempt to control her friend's behavior, but did not yet believe his actions warranted leaving:

> This last conversation I had with her I asked her, "do you want to leave him or are you thinking about leaving him?" and she said, "yes." So, I told her that like, although I didn't tell her that you should leave, I was like "I will support you in doing that," but then I also told her that he's not actually physically hit her. Yes, I think that that could likely come eventually and I told her that if he ever does physically hit her that she has to get in the car and leave immediately and she agreed with that because I think right now she's hoping they can figure it out and reconcile this because in both of our opinions like one he… if he punches her, like that's just throw in the towel.

In this particular instance, Danielle's response was rooted in sincere concern for her friend, but her lack of knowledge of abuse dynamics resulted in downplaying his behavior because it had not yet resulted in physical violence. Research has shown that amongst women in heterosexual relationships who have been victimized by and subsequently left abusive partners, recognizing their experience was indeed abusive

served an extremely important function in the leaving process (Ferraro & Johnson, 1983; Ulrich, 1991). Victim-survivors often initially believe the abuse in their relationship is "normative" (Barnett, 2001, p. 4) and recognition that their experience is abusive is central to the leaving process (Short et al., 2000). Further, downplaying abuse can undermine a victim-survivor's efforts to effectively manage the abuse they are experiencing (Renzetti, 1989).

Failure to recognize the harm and risk associated with coercive and controlling behaviors is not uncommon. Risk assessment tools used in the domestic violence field have historically skewed heavily towards prioritizing discrete violent acts in determinations of risk. There is, however, growing evidence that the presence of a high level of coercive control, even without previous physical violence, is a significant risk factor for potential fatality or serious injury, particularly when a victim-survivor chooses to leave the relationship (Myhill & Hohl, 2019).

Friends and family members potentially serve a valuable role in helping victim-survivors to recognize their experience as abusive and unacceptable, which is of particular importance in situations where coercive control without physical violence is present. In these instances, victim-survivors may unknowingly be at high risk of future severe harm or fatality. With this in mind, educating social network members of risk factors and the dynamics of coercive control may go a long way in preventing caring network members from inadvertently reinforcing the victim-survivor's commitment to an abusive relationship by focusing on violence as the primary indicator of harm and risk

and better prepare them to effectively aid the victim-survivor in escaping the relationship safely.

Indirect or Direct Support for the Abusive Partner or Relationship

Several participants described engaging in activities that either indirectly or directly expressed support for the abusive partner or the relationship. Indirectly, many participants described participating in activities with the victim-survivor and their abusive partner, including dinners, holiday visits, and family vacations. For others, they made specific decisions to directly support the abusive relationship by participating in wedding dress shopping or the couple's wedding.

In the pre-labeling phase, many participants described meeting their friend or family member's abusive partner over dinner or a holiday meal. Claire, whose only daughter was in the early stages of her relationship, had only met her daughter's partner once over dinner. She had invited him to join their weekly family dinner and continued to invite him to dinner regularly, an invitation that was declined from thereafter. This behavior, of course, is quite normal in the early stages of a relationship, but much like friends or family members having a drink with someone whom they do not yet realize has a drinking problem, should be understood as reinforcing.

Not all participants felt like they could directly challenge the victim-survivor and as a result, felt forced to choose a reinforcing strategy to maintain the relationship or their own safety. For Rachel, whose cousin lived in another state and was in a relationship

with an abusive partner who refused to move out of her home, she found herself in a position of feeling forced to spend time with the abusive partner. When Rachel traveled with family to visit in the post-labeling phase, they hoped their victim-survivor family member would choose to come home with them. Instead, they found that the couple had made up in the time between when the trip had been planned and the family's arrival. Over the course of the trip, she participated in a number of group activities that included the abusive partner, including going to dinner and swimming at the beach. She worried that directly challenging the abuser or the victim-survivor could put the family in danger.

Barbara recounted wedding dress shopping with her sister, an activity that did not specifically involve the abusive partner, but that indicated direct support for the relationship. Barbara's sister was hopeful that an engagement was in her future, a sentiment not shared by either herself or her other family members:

> I remember they were they were talking about getting married and to the point that we had gone and looked at wedding dresses. She thought an engagement was coming and my mom... it was just like the saddest thing because my mom and I were with her and we're like, we are not happy about it. It was just... we just didn't know what to do. Like we wanted to support her and you know, we didn't know if she was going to get married. We didn't want to not be invited because we didn't support it.

For Barbara, continuing her relationship with her sister seemed to require that she appear supportive of the abusive relationship and was excited for this potential next step in their relationship.

Similarly, Danielle had originally been slated to serve as a bridesmaid in her friend's wedding, who married the father of her child after becoming pregnant very early

in the relationship. After the bride's family protested the marriage and her sister refused to participate, she stepped in as maid of honor. Danielle described intentionally choosing to reinforce the relationship because she felt her friend needed a supportive relationship in her life and was not getting it anywhere else:

> They just wanted her to leave him but she was like it's his kid, like, we have custody issues, and I love him. So... like throughout this entire thing like there's multiple levels of drama with her family freaking out, her being upset at things he's done, then hiding it from her family because they're already anti-her husband. And so I, when she would bring up things that I felt were problematic, I would try to be a little gentle with it, because she was getting so many people from so many directions saying like you have to end this relationship. I wanted to be the ally who like could be there and be like, "you can tell me things and I'm not going to criticize your decisions."

Danielle's case, in particular, points to a common theme that emerged in several participants' experiences. The use of inconsistent strategies across the victim survivor's support network during the same time frame may present another inconsistency with the potential to reinforce the afflicted partner's harmful behavior. This finding mirrors Duggan and Kilmartin's (Duggan & Kilmartin, 2016) finding that inconsistencies across family members (i.e. Mom nurtures while Dad is punishing), could serve to inadvertently reinforce the harmful behavior, but recognizes that inconsistencies across the social support network, specifically including close friends, could have a similar effect. This dynamic will be discussed in further depth at a later point.

Punishing Behavior (RQ3)

INC theory characterizes punishing behaviors as those communicative behaviors on the part of the functional partner to punish the afflicted partner for their continued participation in the harmful behavior. Participants in this investigation described punishing strategies in a variety of ways, including enacting certain forms of social support, such as giving unwanted advice, and directly challenging the victim-survivor. Finally, participants described cutting off or limiting contact with the victim-survivor, a punishing strategy that led to the isolation of the victim-survivor.

Unsolicited Advice

Participants reported use of multiple forms of enacted social support, most of which closely aligned with reinforcing alternatives, but offering unsolicited advice was described by participants as a punishment strategy, a determination supported by social support literature. Goldsmith (2004) defines enacted social support as "what individuals say and do to help one another" (p. 13). Research indicates that not all forms of enacted social support are recognized by support-seekers as helpful. Different types of stressful events require different forms of coping and thus, require different forms of social support (Cutrona & Russell, 1990). In a multitude of studies, support-seekers specifically reported unwanted advice as having been experienced negatively and in some cases, had either no effect or even produced negative consequences (Goldsmith, 2004). Participants' descriptions of unwanted support mirrored these findings. Danielle's close friend had

immediate family members who did not support her marriage to an abusive partner. She recounted that "everyone in her life gives her advice that she doesn't necessarily want from them." This unsolicited advice, in combination with direct challenges, had reportedly driven a wedge within the family and significantly limited their interactions with the victim-survivor.

Rachel reported that she felt she had to give advice when she received calls or texts from her cousin in which she shared details of the abuse she was currently experiencing, videos or voice-recordings of the partner's abusive behavior, and sometimes photos of bruises:

> If someone is in that immediate danger, you have to try to give them instructions on what to do to get out of it. And so I would do that. And then maybe she would do one of the things that I told her, but then the next day she would go back.

Rachel said that it became obvious that her advice was both unwanted and not followed. After this realization, when her cousin sent a video of her partner engaging in verbal abuse yet again, Rachel chose to stop telling her what to do anymore and instead responded "yeah, I know." Rachel's experience exemplifies the back and forth inconsistency predicted by INC theory in the post-frustration stage, where she alternates between punishment of offering unwanted advice and then responding with reinforcement through the use of minimizing the abuse by saying "yeah, I know."

Social support literature recognizes that many factors go into a support receiver's judgment of receiving advice as either a positive, neutral, or negative experience. Controllability of the stressful situation, by both the advice-giver (functional partner) and

the advice receiver (afflicted partner) heavily impact the perceived helpfulness of the advice. If the advice-giver (functional partner) has some control over the situation (e.g. the ability to prevent harm to the advice-receiver or afflicted partner) or some recognized expertise related to the stressful experience, the advice will more likely be perceived as helpful and experienced positively (Cutrona & Suhr, 1992). This distinction is seen most clearly in the comparison between Rachel's experience of offering unsolicited advice to her cousin, which was not well received, and the advice given by another participant, Elise, to her sister. Elise's expertise as an attorney, who has worked previously in cases involving victim-survivors in intimate partner violence, was seen as an asset. Her advice was not only welcomed, but requested by her sister. On the other hand, Rachel's unsolicited advice could not effectively change her cousin's situation or prevent her from experiencing harm, so it was viewed as unwanted and unhelpful.

Further, researchers have established that offering unsolicited advice can be understood as a face threat to the advice receiver (Goldsmith, 2004). Face (Goffman, 1967) refers to an individual's performance of particular social identities in interactions and their need "in having others' actions sustain those performances" (Goldsmith, 2004, p. 58). When advice is given, it may present a face threat to victim-survivors because "we may resent the way in which telling us what to do can undermine our self-presentation as competent, independent adults capable of managing our own lives" (p. 59). In this way, unsolicited advice by functional partners poses a serious face threat to afflicted partners and should be viewed as a punishing strategy.

Directly Challenging the Victim-Survivor

Directly challenging the survivor was a relatively common strategy used amongst participants. As predicted by INC theory, this tactic was used in the post-labeling and post-frustration phases. Emily described responding to the inconsistent cycling in and out of the relationship pattern of her friend's abusive relationship aggressively and its disappointing result:

> I'd see a picture of them together or something like that on Instagram or I see [him] comment on [his partner's] Instagram, like "I love my handsome man" and then I would immediately like screenshot that and send it to [him] and be like "oh really? You know, "what do you mean you guys are back together again?" That probably wasn't that productive.

Another participant, Claire, described a consistent pattern of challenging her daughter's involvement in her relationship with an older boss. She labeled the relationship problematic based on her daughter's negative comments about him before they engaged in a relationship and started challenging her involvement in the relationship almost immediately:

> She said, "I want to get engaged to [him]," and I said, "we don't know him." And she would cry and whenever she would bring him up and I would express some sort of concern about not knowing this guy and what her plans were… I would meet resistance. It was like her defenses were triggered at that point.

Claire described these interactions as ones in which she expressed her love and concern consistently for her daughter, but the challenging nature of the conversation seemed to override these other sentiments.

Later, after a tenuous holiday with her daughter, Claire described showing up at her daughter's apartment unexpectedly a few weeks later to express her concern over the

relationship. The interaction, after first appearing to be successful, had a surprising, but devastating outcome:

> We surprised her on a Sunday afternoon and she was there and we just went into her apartment and we talked to her about it and the emotions were high. … We just said, "look, you know… things are going too fast [with him]. You know, we're concerned here." She talked to us this time. …We went out and had supper at [restaurant] and the emotional distance had been closed. … Eleven days later, he instigated a break and I haven't had a normal relationship with her since.

At the time of the interview, Claire had not seen or spoken to her daughter in the six years since. Claire's experience speaks to the ever-present risk functional partners manage as they determine how best to approach the afflicted partner. In the context of IPV, these decisions are particularly complex because the afflicted partner's behavior is not just associated with a harmful substance or behavior, but a third relationship partner whose behavior impacts the relationship dynamics between the afflicted and functional partner. In Claire's case, her use of consistent punishing strategies eventually led to being cut off from contact with her daughter, effectively ending any chance at influencing her decision to remain in the relationship unless her daughter chooses to engage her again at some point in the future.

Limiting Contact with the Victim-Survivor

For some participants, limiting contact with the afflicted victim-survivor was a punishing tactic necessary for their self-protection. The severe emotional toll of engaging in these conversations was consistently discussed by participants and for some, the only option they felt available for protecting their mental health and energy was to step back

from the relationship. Rachel, in particular, spoke about her transition post-labeling to post-frustration and how she shifted from first feeling like she was being helpful to no longer wanting anything to do with hearing about the relationship:

> At first, I take it as this person is confiding in me. They need my help. They trust me. That's the first reaction and then you try to help and then you realize that you're… what you're trying to give this person or what you want for this person isn't happening. Nothing is moving. Nothing is changing and then, it feels like a waste of words…. And then you decide I don't want to do this anymore. Like maybe you're still doing this, but I don't want to do this anymore.

Rachel's frustration led to a significant shift in their interactions, where she felt she had to create a boundary.

It is important to recognize that while victim-survivors report these punishing strategies as negatively experienced, a negative experience does not directly translate to ineffective in terms of influencing health behaviors. INC theory would predict that intermittent punishing and reinforcing messages lead to inadvertently reinforcing the victim-survivor's commitment to abusive relationship partner (Duggan & Kilmartin, 2016). Network members must be cautious in their use of punishing strategies, as they may lead to isolation from the victim. Previous INC theory research has found that influence appears to be most effective at leading to the cessation of the unhealthy behavior when punishment, coupled with reinforcing alternatives, is used (Le Poire et al., 2000).

Reinforcing Alternatives (RQ4)

In this new context, how participants discussed reinforcing alternative behaviors were similar to previous INC theory research. In particular, close friends and family

members often encouraged victim-survivors to seek professional help. In the present investigation, enacted social support also closely aligned with reinforcing alternatives. While this particular behavior has not yet been identified in previous INC theory research, certain types of enacted social support proved to be a valuable form of reinforcing alternatives in this particular context. Each of these strategies ultimately served to encourage the victim-survivor's agency, ability to operate independent of the partner, and their self-worth, a strategy that challenged the victim-survivor's commitment to the abusive relationship partner, but did not punish them for their participation in the relationship.

Encourage Seeking Professional Help

Much like encouraging an addict to seek out addiction counseling or Alcoholics Anonymous, several participants encouraged the victim-survivor to seek professional help, either in the form of personal or relationship counseling. Rachel, whose cousin was living in another state with her abusive partner at the time of the interview, indicated encouraging outside help was the most successful strategy she had used to date:

> I've been telling her over the course of the past year to seek professional help. And then, more recently, she did. She told me. This is after, you know, maybe twenty times of telling her. … that's the only thing that has been effective in terms of what I have done.

Sarah went to great lengths to ensure her friend was managing his mental health, an ongoing concern she felt significantly impacted his ability to manage amid the abusive relationship:

> I mean, we went through a period of time where I was checking in with him like daily like did you go to your therapy appointment? Are you taking your meds? Like, is there anything that we need to be assessing in terms of like risk related to just your mental health?

When her friend returned to the relationship after a period of having left, she says she also encouraged him to seek out couples' counseling, telling him, "you can repair relationships… but you have to both be committed… you need outside help... You know, relationships that are abusive and broken do not fix themselves."

Enacted Social Support

Participants also reported use of multiple forms of enacted social support. Social support has been identified as a factor that can aid IPV victim-survivors in deciding to end or make changes to an abusive relationship. Zapor and colleagues' (2018) examination of the relationship between types of social support and IPV victim-survivors' process of change provides important support for understanding certain forms of enacted social support as a reinforcing alternatives strategy. Victim-survivors from a shelter population who were more engaged in the process of change reported more social support than those less engaged in the process. These findings suggest that social support, when provided after the victim-survivor recognizes there is a problem that must be addressed, may provide the necessary sense of security and confidence for ending the relationship. Of the various types of enacted support recognized in social support literature, participants reported enacting tangible and emotional support often in their interactions with victim-survivors.

Many participants described the provision of tangible support, such as help moving out or in finding a job. Sarah, for example, helped her close friend move out of the home he shared with this girlfriend. He later returned to the relationship, but she described how empowering it felt to provide this sort of support:

> At that point, I was like, "Awesome. I've got you. Definitely we can totally handle this. I'm here for 24/7. We can get you moved out, get your own place. This is gonna be great. You're healing over everything in this relationship… That is so freaking rough," but at that point, I thought like you're stepping out in the sunshine and you're going to get through this and I felt like I had a whole lot of power to support and encourage at that point.

Anita described providing both tangible and emotional support, which involves "expressions of caring, concern, empathy and reassurances of worth" (Goldsmith, 2004, p. 13), as a means to empower her victim-survivor friend to leave her abusive relationship partner:

> I tried to help her like as far as finding a job and a stable income and food stamps. I tried to help her so that she could be able to do things on her own, you know, like feel secure enough to live on her own, without him, even though he wasn't really the breadwinner, but she believed he was. She believed she needed him, so I tried to empower her that way.

Anita also helped her friend to develop a safety plan for leaving and a parenting plan to work out co-parenting and visitation with her ex once she finally ended the relationship for good. She attended court with her friend and taught her breathing exercises to help self-regulate when she was dealing with high levels of stress and anxiety during the mediation process. "Getting her out of survival mode," Anita described, allowed her friend "to step back from the situation… if she had had that sooner, I think that the process would have been much quicker." As Anita watched her friend leave and then return to the harmful

relationship, she continued to offer support that helped her friend realize leaving was a long-term option that could work for her and that she would have consistent support and assistance in doing so.

Elise recognized that she had a unique role to play in supporting her sister both emotionally and tangibly because of her career as an attorney. On top of supporting her to navigate the legal system and file a restraining order against her abusive partner, she recalled juggling her personal and professional response to the situation:

> She knew that… this is something that I help people professionally deal with. …After I cried and screamed with her, and you know, alongside of her a little bit, I switched gears to that professional voice and that just was not what she needed from me and not in that moment. And so, I found that being a bit more relaxed and kind of switching gears to using curse words and doing that kind of thing… that helps her to know that somebody else was just as pissed off about that. … And she was more open to me when I did that, which is, you know, the opposite of how I deal with it in a professional setting.

Anita and Elise's responsive and consistent approaches demonstrate the value of survivor-led enacted support, as well as the appropriateness of the INC theory framework in this particular context. Anita recognized that she could not force her friend to leave her abusive partner, but that "she has to make that decision" and it "has to be on their terms, on their time." Likewise, Elise recognized that she must respond to her sister's specific needs in real-time, offering the support required in the given situation and adjusting when what she was offering was not received well. Rather than using reinforcing behaviors such as avoiding the topic to maintain a connection with the victim-survivor or punishing them for their involvement in the relationship, both consistently reinforced alternatives.

The use of reinforcing alternatives was common amongst participants, but those who were also able to avoid the use of intermittent punishing and reinforcing strategies appeared to have the most successful outcomes and experience the least frustration, a finding consistent with previous INC theory results. Anita and Elise's approach, which focused on consistently reinforcing alternatives, appeared to be experienced positively by both the functional friend or family member as well as the victim-survivor and it was successful during the post-labeling and post-frustration phases. INC theory would predict that the victim-survivors in Anita and Elise's lives had the highest likelihood of ending the harmful behavior and in this particular case, both victim-survivors permanently left their abusive relationships.

COMMUNICATION ACROSS STAGES: INCONSISTENT SOCIAL NETWORKS (RQ5)

The majority of participants described communication across the pre-labeling, post-labeling, and post-frustration stages consistent with patterns predicted by INC theory. As seen in previously discussed findings, individual participants reported using inconsistent strategies across stages and their descriptions aligned well with the INC theory framework. These findings evidence the appropriateness of INC theory in the context of conversations about intimate partner violence between both close friends and family members.

Interestingly, the current application points to other inconsistencies that appear to influence behavioral outcomes not yet addressed in previous INC theory research.

Differences in victim-survivor social network members' transitions across pre-labeling to post-labeling stages were previously highlighted in the Labeling (RQ1) section, but respondents also reported use of differing strategies across the victim-survivor's close social networks when network members were each within the same stage. While Duggan and Kilmartin (Duggan & Kilmartin, 2016) found that inconsistent messages across a family have the potential to influence health behaviors, the majority of participants in the current study described interactions in which the broader social support network of victim-survivors appeared to serve this function as well. Family members referenced conflicting messages across the family (Barbara; detailed more below), while friends recognized that family members were minimizing the abuse they were taking seriously (Nathan). Friends also reported engaging in responses that conflicted directly with either family members' messages about the relationship (Danielle; detailed more below) or other friends in the victim-survivor's life (Sarah & Anita).

Barbara's experience mirrors Duggan and Kilmartin's (Duggan & Kilmartin, 2016) findings, supporting their conclusion that inconsistent messages within a family can influence afflicted partner's behaviors. Barbara described being acutely aware of how little control her sister had over her own life, while her mother failed to recognize just how bad the situation truly was:

> You know… my mom… my mom is still this way… she just wants to see the good in everyone and it's really hard for her to see… like, I was trying to tell her that "this is bad. He is not a good person," and she would see certain things, but for the most part, I think she just really wanted to trust my sister. Like, "oh well, she's staying with him, it can't be all bad." I just don't think she realized that my sister had no say in her life.

Barbara and her mother had both labeled the relationship as problematic before, but their responses to the victim-survivor family member were very different during this post-labeling phase. Barbara was challenging her sister to leave the relationship, a punishing strategy, while her mother seemed to be minimizing the abuse or avoiding the topic altogether, both reinforcing strategies. It is possible the family's conflicting messages may have influenced the victim-survivor to reject the consistently punishing strategy Barbara utilized in the post-labeling stage. What is clear is that the victim-survivor continued the relationship at this point and Barbara found herself increasingly frustrated when her attempts to influence her sister to end the relationship failed, leading her into the post-frustration phase.

Consistent with INC theory predictions, once she reached the post-frustration phase Barbara described feeling as though she was walking on eggshells, navigating between directly challenging her sister and being "so careful in what I said in order to keep her talking to me." Barbara's attempts at directly challenging her sister were "driving us further apart or driving her further away." Barbara described shifting to heavily focus on reinforcing alternative strategies, such as inviting her sister to social events and even keeping her sister's dog when she would leave to see her boyfriend, a strategy she hoped would give her sister some reason for having to return. While this was occurring, her mother continued to downplay the seriousness of the situation, a reinforcing strategy:

> I felt kind of alone and that I was the only person that really realized… I would tell my Mom and she would try to find something positive in it or she wouldn't believe the full extent of it.

The relationship continued until Barbara's sister was attacked by her abusive partner and sustained serious injuries that put her in the hospital. At that point, the severity of the abuse was undeniable and Barbara's sister pressed charges with the support of her entire family.

Close friends also reported similar experiences of engaging in responses that conflicted directly with members of the victim-survivor's family and larger support network. Danielle, a close friend, saw herself as the confidant who would always be there for the victim-survivor, even as other family members seemed to become increasingly distant. The first reported conflicting responses occurred when the victim-survivor's family boycotted her wedding to the abusive partner and Danielle stepped in as maid of honor. Danielle knew the relationship was problematic, but decided to support her friend by participating. As the marriage progressed, she spoke repeatedly about intentionally choosing to interact with her friend in a way that countered the message strategies of others in the victim-survivor's life:

> She doesn't need one more voice expressing concern. She needs someone who's there and is on her side, no matter what. Like… who isn't going to tell her, "Well, that was a stupid thing. Why didn't you leave? Why didn't you call the police and say I need help?" …That's not what she needs… she needs someone to just be … someone to listen honestly, completely non-judgmentally. Even her co-workers have called her crazy for not leaving and these are people who work in families often that have abuse going on with them. … She's well aware that this is problematic and has assessed the situation and has decided it hasn't gotten bad enough to completely throw in the towel.

Danielle saw herself as the "alarm system" in the situation. She had positioned herself as a trusted advisor and as such, was told things that others were not about the situation:

> Because I'm so non-judgmental, I'm told things that other people aren't and I know that abusers tend to isolate people and I don't want her to isolate herself from me and I feel like she's done that with some other people who have been more judgmental. …To make sure that she tells someone in her life once abuse turns physical or once she feels her son's in danger, I started to take the role of the person who's not going to tell her what to do because I want her to tell someone. I don't want him to give her a black eye and then she not tell me because she's afraid then of what I would say because I've been so judgmental before.

It is clear that Danielle has a genuine concern for her victim-survivor friend and has chosen this particular reinforcing strategy out of a desire to prevent her friend from further isolation, a valid concern in this context. However, if INC theory can be expanded to recognize that close friends can influence victim-survivors in ways similar to family members, Danielle's reinforcing strategy, combined with the punishing strategies of the victim-survivor's co-workers and other family members, could create a pattern of intermittent punishing and reinforcing. This inconsistent reinforcing and punishing across the victim-survivor's broader social support system could have inadvertently reinforced the victim-survivor's commitment to the abusive relationship. At the time of the interview, the victim-survivor's relationship with her abusive partner was still intact.

Charlotte's experience serves as a helpful example of the potential for reversing course from use of intermittent punishing and reinforcing across a family system to a coordinated and consistent response that can influence a victim-survivor to successfully and permanently end their harmful relationship. Early on in the relationship, Charlotte

reported that her family mostly avoided the topic of her sister's relationship. Charlotte remembers not liking her sister's partner very much and when the family would get together, her sister's partner would often leave to go to the other room. Her father did not seem to like him and the two regularly argued on a public social media outlet. When her sister revealed that her husband had had an affair and the couple failed to reconcile, however, things began to change.

While her mother was continuing contact with her sister's partner and attempting "to mediate the marriage," a reinforcing strategy, the family had mostly decided to give the couple space to work out their differences and their contact became significantly limited, a reinforcing strategy aligned with direct support of the abusive relationship. When Charlotte realized how miserable her sister was, she decided to learn about abuse dynamics and reached out to a friend of a friend she knew had experience in researching abusive relationships. Over the course of many conversations, Charlotte became acutely aware that her sister was in a relationship that posed a significant risk. After this recognition, she spent hours each day reading articles and asking questions to the researcher with whom she had recently connected. As she learned new information, she worked to get the family on the same page:

> My parents live within walking distance of them. During the past six months when they were trying to reconcile their marriage… they would still go over to dinner at my parents' house and do the same things. … So, they were on board, trying to forgive [him] and trying to reconcile until I came to them and I said… I listed off all of the little things that had been adding up and I was like, "this happened. And then this happened. I think she needs to leave." And so, they were kind of following my lead.

While Charlotte discussed difficulties that arose when she acted as a gatekeeper of information and did not share everything she was learning across the family system, but ultimately, her strategy was relatively successful and her sister eventually left her abusive husband:

> One night, she said "I don't know what to do," and I said, "it's not safe for you to live there" and I think that was the one time I ever said something and she left the next day.

The process of leaving proved to be difficult for Charlotte's sister and at the time of the interview, she was embroiled in an emotionally exhausting custody battle where she had to share custody of her daughter equally with her abusive former partner and no longer was able to see her step-son, whom she had cared for over many years. Charlotte, however, believed that the family's united front in supporting her sister after she left, has been the most influential strategy so far and is what had kept her from returning to the relationship: "I think that's the reason why she hasn't gone back, you know… it was because of us around her."

ISOLATION (RQ6)

In previous research, victim-survivors have reported a variety of responses from social network members that could either lead to or utilized isolation. While responses reported in previous research focusing on survivor experiences aligned with both punishing and reinforcing strategies within the INC theory framework, in the current investigation, strategies that led to or involved isolation of the victim-survivor aligned best with

punishing strategies. As highlighted in the Limiting Contact section, several participants limited contact with the victim-survivor as a means of self-protection, guarding themselves against the emotional fallout related to providing support.

Other participants used punishing strategies, like direct challenges, which, rather than utilizing isolation, resulted in the victim-survivor's increased isolation from social networks. For Claire, whose experience with her daughter was highlighted in more detail in the Direct Challenges section, the consistently punishing strategies she utilized led to a complete break in the relationship. Claire's experience highlights the dangers of functional friends and family members face when the punishing strategies they utilize are interpreted by a victim-survivor who may be heavily influenced by their controlling or abusive partner. Claire described being utterly shocked by her daughter's response, which involved telling her that she no longer wanted to have contact with them, an action she believed to be the result of the abusive partner's influence:

> He was not there, but he instigated a break and she surprised us with that information. …her demeanor was completely different that night. She was sitting across from us on a stool or a little chair in her apartment, and it was just… she was reading from a script. She was literally reading from a script.

Not having contact with her daughter was devastating for Claire. Her daughter eventually cut off contact with virtually everyone in the family, including "anyone that was in contact with us, all family members, my mother, my husband's mother, my brother-in-law and my sister-in-law, friends." Re-connecting, she believes, would remove the significant influence her daughter's partner currently has in the situation:

> If we can get any amount of contact with her going… physical contact, communication through phone calls, or anything like that, she would be able to see for herself that what she has been told and come to believe is untrue.

In the years following, Claire's efforts have centered around educating herself about abuse dynamics and re-establishing contact. She sends cards and gifts for her daughter and grandchild, has posted videos on youtube with the hopes her daughter will one day stumble upon them. For her daughter's birthday this past year, she organized friends and family to all send birthday cards:

> He intercepts her mail at work… We send her mail to work because it's a state agency and we think that that's secure, but he works there He's got everybody convinced that we're horrible, so he intercepts her mail, but one got through and it was from a good friend of mine.

After receiving the friend's birthday card, Claire's daughter reached out to the friend. They talked for an hour. It was the first time her daughter had spoken with anyone who was also in contact with her mother in years.

Claire's experience makes clear the risk functional friends and family are taking when they challenge afflicted victim-survivors in their lives. The fear of isolating the victim-survivor appeared to significantly influence virtually all of the functional friend and family members strategy use in some way or another. Use of reinforcing strategies, in particular, and as predicted by INC theory, seemed to be fueled by the desire to maintain contact and connection with the victim-survivor. In some cases, functional partners feared the influence of the victim-survivor's abusive partner could lead to isolation, while others had seen other friends and family cut off and wanted to prevent the same from happening to themselves.

Chapter 6: Conclusion

OVERVIEW

The goal of this research was to use INC theory as a framework for investigating how the communication patterns involved in interactions between people in relationships with their abusive partners and their close friends or family members changed over the course of the abusive relationship and how those communication patterns might influence victim-survivors' commitment to their abusive relationship partners. Findings indicate INC theory is an appropriate and helpful framework for analyzing these patterns and understanding their potential influence.

Appropriateness of INC Theory

Participants provided evidence for all three phases outlined in INC theory, including the pre-labeling, post-labeling, and post-frustration phases. Communication strategies utilized by functional partners largely mirrored those found in previous INC theory applications, including predicted shifts over time. However, because the context of the present application of INC theory differs significantly from previous investigations, several new strategies emerged. Minimizing the abuse and indirect or direct support for the abusive partner or relationship appeared as new reinforcing strategies. Unsolicited advice was used by virtually all of the participants and was described as a punishing behavior that threatened the victim-survivor's face needs. Finally, reinforcing alternatives emerged as

the most successful strategy utilized by functional friends and family members. Within the context of IPV conversations, enacted social support appeared to have the most influential power, in that it was experienced most positively by both functional friends and family members and victim-survivors, and its consistent use was associated with victim-survivors feeling empowered to leave their harmful relationships for good. Reinforcing strategies ultimately served to encourage the victim-survivor's agency and improve their self-worth, two qualities previous research has established are important to the leaving process (Merritt-Gray & Wuest, 1995; Ulrich, 1991).

The Role of Broader Social Support Networks

Participants discussed broader social network responses as meaningful in the context of their interactions with the victim-survivor in multiple ways. Labeling the afflicted friend or family member's commitment to their abusive relationship partner as problematic appeared to be influenced by the labeling processes of those around the participating functional partner. Further, inconsistencies in the timing of the labeling process (or the movement from pre-labeling to post-labeling phases) across the victim-survivor's social support network (e.g., one family member realizes the relationship is problematic before everyone anyone else in the family) appeared to produce inconsistencies in strategy use across the network. These inconsistent messages from various members of the victim-survivor's social network were described in ways that mirrored the inconsistent message patterns predicted by previous INC theory

applications, except immediate family members were not the only functional partners who played a role. In the current investigation, participants described close friends and extended family members as key players in this process. As such, future interventions utilizing INC theory should consider the important influential role a victim-survivor's broader social support network could play.

Isolation

In the current investigation, strategies that led to or involved isolation of the victim-survivor aligned best with punishing strategies. Some limited contact with the victim-survivor as a means of self-protection while others used direct challenges that often led to the victim-survivor distancing themselves from the functional partner. In many cases, functional friends and family members seemed to be aware of the risk they were taking in directly challenging the victim-survivor, but for other participants, the isolating response of the victim-survivor came as a total surprise. Future interventions should consider that not all functional partners are aware of the risks related to isolation and how their behaviors may inadvertently lead to that end.

Isolation functioned in another important way in the current investigation. Many participants described their use of reinforcing strategies as motivated by the desire to prevent isolation of the victim. In some cases, the victim-survivor's abusive partner presented a threat, as they appeared to have the ability to influence how the behaviors of the functional partner were interpreted, which could potentially lead to the victim-survivor

distancing themselves. For other participants, previous experience seeing the victim-survivor either cut off contact with or be cut off from other friends or family members heavily influenced their use of reinforcing strategies. Given that punishing strategies may lead the victim-survivor to cut off contact with functional friends and family members, many functional partners chose to instead use reinforcing strategies, not realizing their potential to reinforce the victim-survivor's commitment to the abusive relationship. These findings suggest future interventions should educate functional partners about the potential impact of both punishing and reinforcing strategies, as well as the intermittent use of both strategies. Functional partners should instead be directed toward use of reinforcing alternatives.

PRACTICAL APPLICATIONS

Findings of this application could provide vital information useful for the development of public health campaigns that teach effective communication strategies to those with the greatest access to and influence on victim-survivors. With these findings in mind, campaigns should warn that consistent punishment may further isolate a victim-survivor, putting them at greater risk. Rather, close friends and family members ought to utilize reinforcing alternatives whenever possible. The success of reinforcing alternatives strategies points to the unique potential of influence that empowers, rather than restricts, victim-survivors' choices.

In some cases, use of certain strategies or combinations of strategies resulted from a lack of knowledge about the dynamics of abusive relationships. Because friends and

family members' individual responses and collective communication patterns influence victim-survivors as they make choices about their relationships, interventions should consider the potential benefits of educating victim-survivor's broader social networks about both INC theory and abusive relationship dynamics, including the harm resulting from and risks related to abuse that does not involve physical violence.

LIMITATIONS

The present research contributed to our existing knowledge of supportive communication in the context of intimate partner violence by exploring communication patterns between people in relationships with abusive partners and their close friends or family, how those patterns change over the course of the abusive relationship, and how those patterns may influence victim-survivors' choices. Nevertheless, there are certain limitations that should be considered by researchers who wish to study this context and practitioners who want to apply this research in the field. First, the study focused solely on the experiences of close friends or family members of victim-survivors, without including reports from the victim-survivor themselves. The perspectives of others who may have been an important part of the victim-survivor's support system were also not included. Given that findings from the study suggested the support system as a whole played an important role in this phenomenon, the perspectives of both the victim-survivor and several members of their support systems would be preferable. However, given that the present investigation is the first to utilize INC theory in the context of communication about

commitment to an abusive relationship partner, this examination is an important first step for future explorations that would include the perspectives of more of the parties involved.

Secondly, this study collected retrospective survey and interview data, requiring participants to recount knowledge of past events. I did not observe the interactions discussed in real-time, but rather asked participants to recall their individual experiences based on memory. While self-report data based on recollections of previous events may contain inaccuracies or biases (Metts, Sprecher, Cupach, Montgomery, & Duck, 1991), evidence suggests these data are still valuable for exploring communication phenomenon (Baxter, 2010). Particularly when studying abusive relationships, use of retrospective self-report interviews is a widely used and accepted form of research.

Thirdly, the study is limited by its use of convenience and snowball sampling as means of obtaining participants. Sampling methods may have encouraged participation from those where comfortable talking about their interactions with a close friend or family member who had been or was currently in a relationship with an abusive partner. It is possible that those who felt like their interactions with their close friend or family member had been harmful or received negatively may not have been fully represented in the study. It should be noted, however, that virtually all of the participants discussed things they wish they had done differently, as well as strategies they recognized were not helpful to the situation.

Another sampling limitation is the lack of racial and gender diversity amongst participants. The majority of participants were white women and there were no Black or

Latinx participants. Research has shown gender (Ansara & Hindin, 2010; Douglas & Hines, 2011) and racial differences (Barrett & St. Pierre, 2011; Kaukinen, 2004) in both help-seeking for victim-survivors of IPV, but given the qualitative nature of this thesis and its limited subject pool, the existing study is not able to address these potential differences. As such, results of this investigation should be interpreted and applied accordingly.

FUTURE DIRECTIONS

There are limitations to the findings of this study, but the knowledge gained from these ten participants' perspectives lays an important foundation for future research. One of the major findings of the present investigation is that communication patterns across a victim-survivor's broader social network have the potential to influence their commitment to an abusive relationship partner. Future research should explore INC theory as applied within a single victim-survivor's broader social network, including the perspective of the victim-survivor themselves. Synthesizing and analyzing these connected, but different experiences could provide valuable insights for future interventions and a better understanding of the interplay between conflicting and inconsistent messages.

Additional research should also further explore the power dynamic between functional-afflicted partners that is central to INC theory. Participants in the existing investigation discussed power dynamics to some degree in every interview, hinting at the presence of a co-dependent power dynamic, but not to the extent that would be necessary to fully address related research questions. As such, future research should explore this

relationship in greater depth, with a particular focus on how co-dependency may exist or differ within close friend and extended family relationships.

CONCLUSION

Analyzing the communication patterns between victim-survivors and their social support networks has the potential to contribute to multiple areas of communication and intimate partner violence knowledge and scholarship. The current study used LePoire's (1995) Inconsistent Nurturing as Control theory as an alternative framework for exploring these communication patterns and understanding their potential influence on victim-survivors and their commitment to an abusive relationship partner. Results indicated that INC theory was an appropriate framework in this new context, but that this framework was also useful when extended beyond just immediate family relationships to include victim-survivors' broader social networks, like extended family members and close friends.

IPV interventions must always place the burden of responsibility on those who perpetrate violence, but victim-survivors must also be recognized as agents of change in their own lives who are influenced by those closest to them. The choices victim-survivors make do not occur in a vacuum. By collecting and analyzing the experiences of ten close friends and family members of victim-survivors, the existing research recontextualizes IPV and the choices victim-survivors make within their relationships as phenomena that are embedded within communities. Both perpetrators and victim-survivors are individuals that are part of a broader family, social network, and larger community. While it is not

necessarily the responsibility of victim-survivors' social network members to influence them to end their abusive relationship, recognizing the influential role of those closest to victim-survivors opens the door to new opportunities for intervention and new strategies for social support.

Appendix A: IRB Approval

OFFICE OF RESEARCH SUPPORT & COMPLIANCE

THE UNIVERSITY OF TEXAS AT AUSTIN

P.O. Box 7426, Austin, Texas 78713 · Mail Code A3200
(512) 471-8871 · FAX (512) 471-8873

FWA # 00002030

Date: 04/11/2019
PI: Abigail Hazlett
Dept: Communication Studies
Title: Conversations about Abusive Relationships

Re: IRB Expedited Initial Approval for Protocol Number 2019-03-0017

Dear Abigail Hazlett,

In accordance with the Federal Regulations, the Institutional Review Board (IRB) reviewed the above referenced research study and found it met the requirements for approval under the Expedited category noted below. The study is approved for the following period of time: 04/11/2019 to 04/10/2020. Approval ends at 12 a.m. midnight on approval end date. If the research will be conducted at more than one site, you may initiate research at any site from which you have a letter granting you permission to conduct the research. Retain a copy of the letter in your files.

Expedited category of approval:

☐ 1) Clinical studies of drugs and medical devices only when condition (a) or (b) is met. (a) Research on drugs for which an investigational new drug application (21 CFR Part 312) is not required. (Note: Research on marketed drugs that significantly increases the risks or decreases the acceptability of the risks associated with the use of the product is not eligible for expedited review). (b) Research on medical devices for which (i) an investigational device exemption application (21 CFR Part 812) is not required; or (ii) the medical device is cleared/approved for marketing and the medical device is being used in accordance with its cleared/approved labeling.

☐ 2) Collection of blood samples by finger stick, heel stick, ear stick, or venipuncture as follows: (a) from healthy, non-pregnant adults who weigh at least 110 pounds. For these subjects, the amounts drawn may not exceed 550 ml in an 8 week period and collection may not occur more frequently than 2 times per week; or (b) from other adults and children, considering the age, weight, and health of the subjects, the collection procedure, the amount of blood to be collected, and the frequency with which it will be collected. For these subjects, the amount drawn may not exceed the lesser of 50 ml or 3 ml per kg in an 8 week period and collection may not occur more frequently than 2 times per week.

☐ 3) Prospective collection of biological specimens for research purposes by non-invasive means.
Examples:
(a) Hair and nail clippings in a non-disfiguring manner.
(b) Deciduous teeth at time of exfoliation or if routine patient care indicates a need for extraction;
(c) Permanent teeth if routine patient care indicates a need for extraction.
(d) Excreta and external secretions (including sweat).
(e) Uncannulated saliva collected either in an un-stimulated fashion or stimulated by chewing gumbase or wax or by applying a dilute citric solution to the tongue.
(f) Placenta removed at delivery.
(g) Amniotic fluid obtained at the time of rupture of the membrane prior to or during labor.
(h) Supra- and subgingival dental plaque and calculus, provided the collection procedure is not more invasive than routine prophylactic scaling of the teeth and the process is accomplished in accordance with accepted prophylactic techniques.
(i) Mucosal and skin cells collected by buccal scraping or swab, skin swab, or mouth washings.
(j) Sputum collected after saline mist nebulization.

☐ 4) Collection of data through non-invasive procedures (not involving general anesthesia or sedation) routinely employed in clinical practice, excluding procedures involving x-rays or microwaves. Where medical devices are employed, they must be cleared/approved for marketing. (Studies intended to evaluate the safety and effectiveness of the medical device are not generally eligible for expedited review, including studies of cleared medical devices for new indications).
Examples:
(a) Physical sensors that are applied either to the surface of the body or at a distance and do not involve input of significant amounts of energy into the subject or an invasion of the subject's privacy.
(b) Weighing or testing sensory acuity.
(c) Magnetic resonance imaging.
(d) Electrocardiography, electroencephalography, thermography, detection of naturally occurring radioactivity, electroretinography, ultrasound, diagnostic infrared imaging, doppler blood flow, and echocardiography.
(e) Moderate exercise, muscular strength testing, body composition assessment, and flexibility testing where appropriate given the age, weight, and health of the individual.

☐ 5) Research involving materials (data, documents, records, or specimens) that have been collected, or will be collected solely for non-research purposes (such as medical treatment or diagnosis).
Note: Some research in this category may be exempt from the HHS regulations for the protection of human subjects. 45 CFR 46.101(b)(4). This listing refers only to research that is not exempt.

☑ 6) Collection of data from voice, video, digital, or image recordings made for research purposes.

☑ 7) Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies.
Note: Some research in this category may be exempt from the HHS regulations for the protection of human subjects. 45 CFR 46.101(b)(2) and (b)(3). This listing refers only to research that is not exempt.

☐ Use the attached approved informed consent document(s).

☑ You have been granted a Waiver of Documentation of Consent according to 45 CFR 46.117 and/or 21 CFR 56.109(c)(1).

☐ You have been granted a Waiver of Informed Consent according to 45 CFR 46.116(d).

Responsibilities of the Principal Investigator:

1. Report immediately to the IRB any unanticipated problems.

2. Submit for review and approval by the IRB all modifications to the protocol or consent form(s). Ensure the proposed changes in the approved research are not applied without prior IRB review and approval, except when necessary to eliminate apparent immediate hazards to the subject. Changes in approved research implemented without IRB review and approval initiated to eliminate apparent immediate hazards to the subject must be promptly reported to the IRB, and will be reviewed under the unanticipated problems policy to determine whether the change was consistent with ensuring the subjects continued welfare.

3. Report any significant findings that become known in the course of the research that might affect the willingness of subjects to continue to participate.

4. Ensure that only persons formally approved by the IRB enroll subjects.

5. Use only a currently approved consent form, if applicable. Note: Approval periods are for 12 months or less.

6. Protect the confidentiality of all persons and personally identifiable data, and train your staff and collaborators on policies and procedures for ensuring the privacy and confidentiality of subjects and their information.

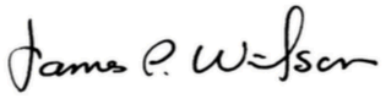
7. Submit a Continuing Review Application for continuing review by the IRB. Federal regulations require IRB review of on-going projects no less than once a year a reminder letter will be sent to you two months before your expiration date. If a reminder is not received from Office of Research Support and Compliance (RSC) about your upcoming continuing review, it is still the primary responsibility of the Principal Investigator not to conduct research activities on or after the expiration date. The Continuing Review Application must be submitted, reviewed and approved, before the expiration date.

8. Upon completion of the research study, a Closure Report must be submitted to the RSC.

9. Include the IRB study number on all future correspondence relating to this protocol.

If you have any questions contact the RSC by phone at (512) 471-8871 or via e-mail at orsc@uts.cc.utexas.edu.

Sincerely,



James Wilson, Ph.D.
Institutional Review Board Chair

OFFICE OF RESEARCH SUPPORT & COMPLIANCE

THE UNIVERSITY OF TEXAS AT AUSTIN

P.O. Box 7426, Austin, Texas 78713 · Mail Code A3200
(512) 471-8871 · FAX (512) 471-8873

FWA # 00002030

Date: 12/02/2019
PI: Abigail Hazlett
Dept: Communication Studies
Title: Conversations about Abusive Relationships

Re: IRB Amendment Approval for Protocol Number 2019-03-0017

Dear Abigail Hazlett,

In accordance with the Federal Regulations for review of research studies, the Institutional Review Board (IRB) reviewed your requested amendment to the above referenced protocol and found that it met the requirements for approval.

Approval for your study expires on 04/10/2020. Expires 12 a.m. [midnight] of this date.

The following requested changes were approved:

- ☐ Continue to use the original approved consent form(s).
- ☐ Use the attached approved informed consent document(s).
- ☐ You have been granted a Waiver of Documentation of Consent according to 45 CFR 46.117 and/or 21 CFR 56.109(c)(1).
- ☐ You have been granted a Waiver of Informed Consent according to 45 CFR 46.116(d).

Responsibilities of the Principal Investigator:

1. Report immediately to the IRB any unanticipated problems.
2. Submit for review and approval by the IRB all modifications to the protocol or consent form(s). Ensure the proposed changes in the approved research are not applied without prior IRB review and approval, except when necessary to eliminate apparent immediate hazards to the subject. Changes in approved research implemented without IRB review and approval initiated to eliminate apparent immediate hazards to the subject must be promptly reported to the IRB, and will be reviewed under the unanticipated problems policy to determine whether the change was consistent with ensuring the subjects continued welfare.
3. Report any significant findings that become known in the course of the research that might affect the willingness of subjects to continue to participate.
4. Ensure that only persons formally approved by the IRB enroll subjects.

5. Use only a currently approved consent form, if applicable. Note: Approval periods are for 12 months or less.

6. Protect the confidentiality of all persons and personally identifiable data, and train your staff and collaborators on policies and procedures for ensuring the privacy and confidentiality of subjects and their information.

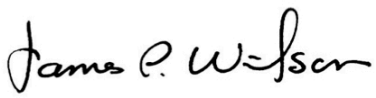
7. Submit a Continuing Review Application for continuing review by the IRB. Federal regulations require IRB review of on-going projects no less than once a year a reminder letter will be sent to you two months before your expiration date. If a reminder is not received from Office of Research Support and Compliance (RSC) about your upcoming continuing review, it is still the primary responsibility of the Principal Investigator not to conduct research activities on or after the expiration date. The Continuing Review Application must be submitted, reviewed and approved, before the expiration date.

8. Upon completion of the research study, a Closure Report must be submitted to the RSC.

9. Include the IRB study number on all future correspondence relating to this protocol.

If you have any questions contact the RSC by phone at (512) 471-8871 or via email at orsc@uts.cc.utexas.edu.

Sincerely,



James Wilson, Ph.D.
Institutional Review Board Chair

Appendix B: Recruitment Language

Study on Conversations About Abusive Relationships

You are invited to participate in a research study. The purpose of this research is to explore communication behaviors between victims of intimate partner violence (IPV) and their close friends or family members. Your participation is completely voluntary.

You are eligible to participate if:

- You are 18 years of age or older
- have previous experience supporting a close friend or family member who was in an abusive relationship (For the purposes of this study, an abusive relationship constitutes any intimate relationship in which there is ongoing and/or repeated instances of coercive control, physical, emotional, psychological, sexual or economic abuse by one partner against the other)

Participation in this study involves:

- Completion of a 20 minute long online survey and 15 minute interview

If you have any questions or want to participate in this survey, please contact abigailhazlett@utexas.edu.

Thank you!

Appendix C: Informed Consent Language

TEXAS
The University of Texas at Austin

UT Austin IRB Approved
Protocol Number: 2019-03-0017
Approved: 11/27/2019

Title of the Project:
Conversations About Abusive Relationships

Principal Investigator:
Abigail Hazlett, Graduate Student, University of Texas at Austin, abigailhazlett@utexas.edu

Faculty Advisor:
Dr. René Dailey, Associate Professor, University of Texas at Austin, rdailey@austin.utexas.edu

Consent to Participate in Research

Invitation to be Part of a Research Study

You are invited to be part of a research study. This consent form will help you choose whether or not to participate in the study. Feel free to ask if anything is not clear in this consent form.

Eligible participants must:

- be 18 years of age or over
- have previous experience supporting a close friend or family member who has been in an abusive relationship with an intimate relationship partner while they were between the ages of 20 and 50 years old

What is the study about and why are we doing it?

The purpose of the study is to better understand how individuals in abusive relationships and their close family members or friends talk about the victim's involvement in the abusive relationship. The ultimate goal is to determine if a particular theory about communicative behavior is applicable to this particular setting and can provide insights for guiding interventions in which close family members and friends successfully influence a victim to end or decrease their commitment to an unhealthy relationship and abusive partner. You are free to contact either the Principal Investigator or their Faculty Advisor at any time should you have any additional questions.

What will happen if you take part in this study?

If you agree to take part in this study, you will be asked to provide consent and then complete a twenty minute survey with questions about your relationship to the victim and abuser and your knowledge of abuse within their relationship. After completion of the survey, you will participate in a fifteen minute interview questions comprised of a series of semi-structured open-ended and closed-ended inquiries meant to elicit descriptions of communication patterns in your interactions with victim over the course of their time in the abusive relationship. You will be asked to detail:

- the types of conversations you had with the victim about their abusive relationship at three particular stages:
  - prior to realizing their relationship was abusive and problematic
  - after learning the relationship was abusive and problematic

    - if applicable, after the victim rejected your concerns and chose to continue the relationship or returned back to the abusive relationship after a period of having left
- the nature of your relationship to the victim
- how your relationship with the victim was impacted by the abusive relationship
- how your life was impacted by the victim's abusive relationship
- the victim's responses to different types of communications about the relationship
- outcomes related to the abusive relationship

How long will you be in this study and how many people will be in the study?

Participation in this study will last about 35 minutes and a minimum of 15 people will participate in interviews.

What risks and discomforts might you experience from being in this study?

There are some risks you might experience from being in this study. Due to the nature of the questions, there is a slight risk of emotional distress, but such effects are not expected. You are welcome to discontinue your participation at any time.

How could you benefit from this study?

Although you will not directly benefit from being in this study, your participation contributes to a better understanding of how close friends and family members can most effectively influence victims of intimate partner violence to leave abusive relationships or support them as they make decisions about the future of their relationships.

What will happen to the samples and/or data we collect from you?

As part of this study we will collect your responses to the interview questions. Interviews will be recorded and transcribed. The interview data collected will be analyzed by the researchers for the purposes of future publication.

How will we protect your information?

We will protect your information by not reporting any individual identifying information that could connect you to your responses.

We may share your data with other researchers for future research studies that may be similar to this study or may be very different. The data or samples shared with other researchers will not include information that can directly identify you.

Under certain situations, we may break confidentiality. If during the study we learn about child abuse or neglect, we will report this information to the appropriate authorities including the police and/or the Texas Department of Family and Protective Services.

We plan to publish the results of this study. To protect your privacy, we will not include any information that could directly identify you.

What will happen to the information we collect about you after the study is over?

Your name and other information that can directly identify you will not be collected, except in the case of your informed consent form, which will not be utilized for any purposes other than documenting your consent to participate.

How will we compensate you for being part of the study?

If you are a current University of Texas at Austin undergraduate student, you may be eligible to receive extra credit for your participation in this study. If you are not a current University of Texas at Austin undergraduate student, you will not receive any type of payment for your participation.

Your Participation in this Study is Voluntary

It is totally up to you to decide to be in this research study. Participating in this study is voluntary. Your decision to participate will not affect your relationship with The University of Texas at Austin. You will not lose any benefits or rights you already had if you decide not to participate. Even if you decide to be part of the study now, *you may change your mind and stop at any time. You do not have to answer any questions you do not want to answer.*

Contact Information for the Study Team

If you have any questions about this research, you may contact:

Abigail Hazlett, Graduate Student, University of Texas at Austin
512-743-8383
abigailhazlett@utexas.edu

Or

Faculty Sponsor: Dr. René Dailey, Associate Professor, University of Texas at Austin
512-471-4867
rdailey@austin.utexas.edu

Contact Information for Questions about Your Rights as a Research Participant

If you have questions about your rights as a research participant, or wish to obtain information, ask questions, or discuss any concerns about this study with someone other than the researcher(s), please contact the following:

The University of Texas at Austin Institutional Review Board
Phone: 512-232-1543
Email: irb@austin.utexas.edu

Please reference study number 2019-03-0017.

Your Consent

Before agreeing to be part of the research, please be sure that you understand what the study is about. You may print a copy of this document for your records. If you have any questions about the study later, you can contact the study team using the information provided above.

I understand what the study is about and my questions so far have been answered. I agree to take part in this study.

Please indicate your consent to participate by continuing to the next page.

→

ON THE NEXT PAGE:

Please indicate your consent to recording your interview by continuing to the next page.

→

Appendix D: Survey Questions

DEMOGRAPHIC QUESTIONS

1. What is your age, as of today's date (in years)?
2. What sex were you assigned at birth?
    a. Female
    b. Male
    c. Intersex
    d. I'd prefer not to say
3. What is your gender?
4. What is your race or ethnicity (as you define it). Select all that apply.
    □ White
    □ American Indian or Alaskan Native
    □ Asian
    □ Black or African American
    □ Hispanic or Latino/a/x
    □ Pacific Islander
    □ Other (specific): _____
5. Have you ever been in a relationship you would characterize as physically, emotionally, or psychologically abusive?
    a. Yes
    b. No
    c. I'd prefer not to say

RELATIONSHIP TO VICTIM QUESTIONS

1. How old were you when your friend/family member's abusive relationship began (in years)?
2. How old was your friend/family member when the abusive relationship began (in years)?
3. What is your relationship to the victim (you may select more than one)?
    □ Parent
    □ Child
    □ Sibling
    □ Extended Family member (grandparent, aunt, uncle, cousin, etc.)
    □ Friend
    □ Co-Worker
    □ Neighbor
    □ Other relationship (specify): _____

4. What is your relationship to the abuser?
   □ Parent
   □ Child
   □ Sibling
   □ Extended Family member (grandparent, aunt, uncle, cousin, etc.)
   □ Friend
   □ Co-Worker
   □ Neighbor
   □ Other relationship (specify): _____
   □ Do not know them outside of their relationship to my close friend or family member
5. Has your friend/family member ended the abusive relationship?
   a. Yes
   b. No
6. How long is/was the relationship (in years)?
7. Did the victim express a desire to leave the relationship at any point?
   a. Yes
   b. No

8. Did the victim try to leave the relationship unsuccessfully at any point?
   a. Yes
   b. No

9. If so, about how many times did they try to leave (planned to, but ended up not doing so)? _____

10. How many times did they actually leave (actually left for a period of time, even if they eventually returned)? ____

KNOWLEDGE OF THE VICTIM'S RELATIONSHIP QUESTIONS

Questions to gauge the interview participants' knowledge of the victim's abusive relationship were modified from the Checklist of Controlling Behaviors (Lehmann et al., 2012).

Directions: Please indicate where you have either witnessed or been told about abuse within your close friend or family member's relationship. Some of these questions may be difficult to think about, but they will allow researchers to gauge a better understanding of the risk and harm associated with your close friend or family member's relationship. Check all that apply:

PHYSICAL ABUSE

My close friend or family member's partner…		I am not aware of or do not know if this behavior occurred	I have personally witnessed this behavior	I was told this behavior has occurred	Both partners have engaged in this behavior
1	threw something at them				
2	pushed or grabbed them				
3	pulled their hair				
4	choked them				
5	pinned them to the wall, floor, or bed				
6	hit, kicked, or punched them.				
7	threatened them with a knife, gun, or other weapon				
8	spit at them				
9	tried to block them from leaving				

SEXUAL ABUSE

My close friend or family member's partner…		I am not aware of or do not know if this behavior occurred	I have personally witnessed this behavior	I was told this behavior has occurred	Both partners have engaged in this behavior
1	physically forced them to have sexual intercourse				
2	pressured them to have sex when they said no				
3	pressured or forced them into other unwanted sex acts (oral, anal, etc.)				
4	treated them like a sex object				
5	inflicted pain on them during sex				
6	pressured them to have sex after a fight				
7	was insensitive to their sexual needs				
8	made jokes about parts of their body				

9	**blamed them because others found them attractive**				

EMOTIONAL ABUSE

My close friend or family member's partner…		**I am not aware of or do not know if this behavior occurred**	**I have personally witnessed this behavior**	**I was told this behavior has occurred**	**Both partners have engaged in this behavior**
1	**insulted them in front of others**				
2	**put down their sexual attractiveness**				
3	**told them they were stupid**				
4	**criticized their care of children or their home**				
5	**swore at them**				
6	**told them they were crazy**				
7	**told them they were irrational**				
8	**blamed them for their problems**				
9	**made untrue accusations**				

ECONOMIC ABUSE

My close friend or family member's partner…		I am not aware of or do not know if this behavior occurred	I have personally witnessed this behavior	I was told this behavior has occurred	Both partners have engaged in this behavior
1	did not allow them equal access to family money				
2	told them or acted as if family money was only theirs ("my money, my house, my car, etc.")				
3	threatened to withhold money from them				
4	made them ask for money for basic necessities				
5	made them account for any money they spent				
6	used their fear of not having access to money to control their behavior				

7	**tried to keep them dependent upon them for money**				

INTIMIDATION

My close friend or family member's partner…		**I am not aware of or do not know if this behavior occurred**	**I have personally witnessed this behavior**	**I was told this behavior has occurred**	**Both partners have engaged in this behavior**
1	**moved toward them when they were angry (with the intent to intimidate)**				
2	**pounded his fists on a table**				
3	**hit the wall**				
4	**smashed or broke something**				
5	**threw or kicked something**				
6	**used angry facial gestures**				
7	**drove angrily or recklessly**				

THREATS

My close friend or family member's partner…		I am not aware of or do not know if this behavior occurred	I have personally witnessed this behavior	I was told this behavior has occurred	Both partners have engaged in this behavior
1	**threatened to hit or kill them**				
2	**threatened to turn others against them**				
3	**threatened to take their children away**				
4	**threatened to make sure they didn't have money**				
5	**threatened to show up unexpectedly or to always be watching them**				
6	**threatened to come after them if they left**				
7	**threatened to have them committed**				

MINIMIZING OR DENYING

My close friend or family member's partner…		I am not aware of or do not know if this behavior occurred	I have personally witnessed this behavior	I was told this behavior has occurred	Both partners have engaged in this behavior
1	denied they had abused them				
2	told them they were lying about being abused				
3	insisted what they did was not so bad				
4	told them to forget about they did and leave it in the past				
5	told them that abuse was a normal part of relationships				
6	told them they couldn't remember hurting them				
7	told them they hurt themselves when they fell				

BLAMING

My close friend or family member's partner…		I am not aware of or do not know if this behavior occurred	I have personally witnessed this behavior	I was told this behavior has occurred	Both partners have engaged in this behavior
Blamed them for their behavior by saying to them:					
1	**The abuse was their fault**				
2	**they deserved the abuse**				
3	**they needed to be taught a lesson**				
4	**they had provoked the abuse**				
5	**"it takes two to tango"**				
6	**they had hurt them first**				
7	**they had asked/dared them to hit them**				

ISOLATION

My close friend or family member's partner…		I am not aware of or do not know if this behavior occurred	I have personally witnessed this behavior	I was told this behavior has occurred	Both partners have engaged in this behavior
1	**told them they couldn't do something**				
2	**forbade or stopped them**				

	from seeing someone				
3	**monitored their time or made them account for where they were**				
4	**restricted their use of the car**				
5	**restricted their use of the telephone**				
6	**listened to telephone conversations**				
7	**pressured them to stop contacting their family and friends**				
8	**made it difficult for them to get a job or pursue a vacation**				
9	**kept them from getting medical attention**				
10	**tried to turn people against them**				

PRIVILEGE

My close friend or family member's partner…		I am not aware of or do not know if this behavior occurred	I have personally witnessed this behavior	I was told this behavior has occurred	Both partners have engaged in this behavior
1	**demanded obedience**				
2	**treated them like a servant**				
3	**treated them like an inferior**				
4	**expected them to meet their sexual needs regardless of their own needs**				
5	**treated them like they were helpless or incapable**				
6	**told them they couldn't get along without them**				
7	**had or demanded the final say in decisions**				
8	**Did not allow them to do the things they thought they had a right to do**				

9	**Treated others like servants**				

Thank you for completing this form.

Relationship abuse can happen to anyone, regardless of gender, ethnicity, age, education, religion, disability status, or sexual orientation. It can happen to couples who are married, living together or dating.

If you are unsure if you or someone you know is in a violent or controlling relationship, or if you have questions about getting help, call the 24-hour SAFEline at **512.267.SAFE** (7233), text them at 737.888.7233 or chat with them at **safeaustin.org/chat**. For deaf people of all identities, please use relay/VRS.

Even if you don't see any of your concerns listed here, you can call SAFEline to talk about your unique situation or with concerns about someone you know or love. Or you can click **HERE** to learn more about healthy relationships.

Appendix E: Interview Protocol

1. Prior to the abusive relationship, how close was your relationship with your friend/family member?
2. Before you realized their relationship partner was abusive, how did you feel about the abusive partner? Did you spend time with them at all?
3. What is your relationship with your friend/family member now?
4. Was there a specific point in time when you realized your friend/family member was involved in an abusive relationship?
5. What did you do when you had this realization?
6. Was the victim aware you had this realization? If so, how did they respond?
7. Do you feel like your friend or family member's abusive relationship impacted your own life in any way? How?
    a. certain opportunities you felt you couldn't pursue?
    b. choices you felt were restricted?
    c. Any specific responsibilities you took over as a result?
8. Did you encourage your friend or family member to leave?
9. What strategies did you use to try to encourage your friend/family member to leave?
10. Was there ever a time you felt like your strategy to encourage your friend/family member to leave wasn't working? How did you change/adapt your behavior after that?
    a. Was there ever a time you were frustrated with your friend/family member not leaving?
    b. How did things change after that?
11. Did you make any efforts to downplay your concern in order to maintain the relationship?
12. If so, what did you do to downplay your concern?
13. How did your friend or family member respond?
14. Are there any strategies for encouraging them to leave that you felt were particularly effective? Why?
15. Can you describe a time you felt powerless in helping your friend/family member with this relationship? Why did you feel this way and how did you respond?
16. Is there anything else you believe is important for me to know about your experience?

Appendix F: Support Language

Thank you for your participation in this survey.

Relationship abuse can happen to anyone, regardless of gender, ethnicity, age, education, religion, disability status, or sexual orientation. It can happen to couples who are married, living together or dating.

If you are unsure if you or someone you know is in a violent or controlling relationship, or if you have questions about getting help, call the 24-hour SAFEline at **512.267.SAFE** (7233), or text them at 737.888.7233 or chat with them at **safeaustin.org/chat**. For deaf people of all identities, please use relay/VRS.

Even if you don't see any of your concerns listed here, you can call SAFEline to talk about your unique situation or with concerns about someone you know or love. Or you can click **HERE** to learn more about healthy relationships.

Appendix G: Preliminary Codebook

Code & Description	
REINFORCING	*Efforts on the part of the network member that validate or reinforce the victim-survivor's involvement in the abusive relationship*
Examples	
• Spending time with the abusive partner (e.g. going on a double-date, etc.) • Extending invitations to the abusive partner (e.g., a family birthday party, etc.) • Encouraging the victim-survivor to "work it out" or give the other partner another chance • Compliment the relationship in some way (e.g., "I've never seen you so happy!"	
Code & Description	
ISOLATING	*Efforts on the part of the network member to discourage the victim-survivor's involvement in the relationship that also isolate the victim-survivor from others outside of the abusive relationship*
Examples	
• Limiting or cutting off contact with the victim-survivor • Refusing to pick up/go to a victim when they ask for help	
Code & Description	
PUNISHMENT	*Efforts on the part of the network member to discourage the victim-survivor's involvement in the relationship*
Examples	
• Direct Confrontation • Encouragement to leave the partner or end the relationship • Negative talk about the partner • Stigmatize the victim-survivor in some way (e.g., verbal abuse, implications that they are a burden, criticizing their decisions, etc.)	
Code & Description	
REINFORCING ALTERNATIVES	*Efforts on the part of the network member to encourage the victim to participate in an alternative behavior*
Examples	
• Encouragement to attend a support group • Encouragement to go back to school	

Appendix H: Final Codebook

STRATEGIES	
Code & Description	
REINFORCING	*Efforts on the part of the network member that validate or reinforce the victim-survivor's involvement in the abusive relationship*
Examples	
• Spending time with the abusive partner (e.g. going on a double-date, etc.) • Extending invitations to the abusive partner (e.g., a family birthday party, etc.) • Encouraging the victim-survivor to "work it out" or give the other partner another chance • Compliment the relationship in some way (e.g., "I've never seen you so happy!"	
ISOLATING	*Efforts on the part of the network member to discourage the victim-survivor's involvement in the relationship that also isolate the victim-survivor from others outside of the abusive relationship*
Examples	
• Limiting or cutting off contact with the victim-survivor • Refusing to pick up/go to a victim when they ask for help	
PUNISHMENT	*Efforts on the part of the network member to discourage the victim-survivor's involvement in the relationship*
Examples	
• Direct Confrontation • Encouragement to leave the partner or end the relationship • Negative talk about the partner • Stigmatize the victim-survivor in some way (e.g., verbal abuse, implications that they are a burden, criticizing their decisions, etc.)	
REINFORCING ALTERNATIVES	*Efforts on the part of the network member to encourage the victim to participate in an alternative behavior*
Examples	
• Encouragement to attend a support group or therapy • Encouragement to go back to school or job training	

STAGES	
Code & Description	
PRE-LABELING	*Period of time prior to the functional partner's labeling of the afflicted partner's relationship as problematic*
LABELING	*Moment at which the functional partner realizes the afflicted partner's relationship is problematic*
Examples	
• Afflicted partner tells functional partner about abuse • Functional partner witnesses abusive partner engage in abusive behavior toward the afflicted partner	
POST-LABELING	*Period of time immediately after the functional partner's labeling of the afflicted partner's relationship as problematic, but prior to reaching point of frustration*
POST-FRUSTRATION	*Period of time after functional partner reaches point of frustration because their efforts to influence afflicted partner to end the abusive relationship partner have not been successful*
AFFLICTED PARTNER REACTIONS	
Code & Description	
DISTANCE/CUT OFF FUNCTIONAL PARTNER	*Afflicted partner's response to functional partner's communication strategy is to distance themselves or cut off contact*
Examples	
• Afflicted partner does not speak to functional partner for a period of time • Afflicted partner cuts off contact completely • Afflicted partner stops sharing details about their life or relationship, but remains in contact	
LEAVE ABUSIVE RELATIONSHIP AND THEN RETURN	*Afflicted partner leaves the abusive relationship, but later returns*
AFFIRM ABUSER PERSPECTIVE	*Functional partner's communication strategy is interpreted as having affirmed the abuser's perspective about the functional partner*
Examples	
• Use of punishing strategy confirms for the afflicted partner the abuser's claim that family or friend is harmful or abusive • Use of punishing strategy confirms for the afflicted partner the abuser's claim that no one cares about them	

Code & Description	
ASK FOR HELP	*Afflicted partner's response to functional partner's communication strategy is to ask for help*
Examples	
• Afflicted partner asks for advice • Afflicted partner asks for assistance moving out • Afflicted partner asks for legal support	
STRATEGY CHOICE MOTIVATION	
Code & Description	
EFFICACY	*Functional partner's use of specific strategy influenced by their perceived ability to change or influence the situation*
Examples	
• Functional partner feeling as if their efforts are a "waste of words", pointless, or make no difference • Functional partner feeling as if their efforts can make a difference	
GENDER NORMS	*Functional partner's use of specific strategy influenced by attention to gender norms*
Example	
• Functional partner believes afflicted partner has emotional needs they cannot express because of gender norms about being a heteronormative man	
FEAR OF ISOLATION	*Functional partner's use of specific strategy influenced by their fear of isolating the afflicted partner*
Examples	
• Functional partner worries if they push too hard, the afflicted partner will no longer speak to them • "Walking on eggshells" • Towing a "fine line"	
SELF-PROTECTION	*Functional partner's use of specific strategy influenced by their own needs*
Examples	
• Functional partner is too emotionally exhausted to engage further • Functional partner is concerned about their own physical safety	

Code & Description	
URGENCY	*Functional partner's use of specific strategy influenced by urgency of the situation*
Examples	
• Afflicted partner is in immediate danger or has immediate need (e.g., no money) • Afflicted partner is not in immediate danger or has no immediate need	
KNOWLEDGE OF ABUSE DYNAMICS	*Functional partner's use of specific strategy influenced by their own knowledge of abuse dynamics*
Examples	
• Functional partner does not recognize red flags/warning signs • Functional partner recognizes red flags/warning signs • Functional partner not aware of risk to afflicted partner • Functional partner aware of risk to afflicted partner	
RELATIONAL CLOSENESS	*Functional partner's use of specific strategy influenced by their perceived relational closeness with the afflicted partner*
Examples	
• Functional partner believes they can get away with a punishing behavior because the afflicted partner has no one else who will listen to them • Functional partner believes they should be non-judgmental because they feel responsible to attend to the afflicted partner's needs	
PHYSICAL PROXIMITY	*Functional partner's use of specific strategy influenced by their physical proximity to the afflicted partner*
Examples	
• Functional partner lives too far away to really know what is going on • Functional partner lives too far away to interject themselves • Functional partner is no longer able to interact face to face with afflicted partner	
AFFLICTED PARTNER DIRECTION/REQUEST	*Functional partner's use of specific strategy influenced by afflicted partner's expressed needs*
Examples	
• Afflicted partner requests assistance moving out • Afflicted partner requests assistance filing a restraining order • Afflicted partner tells functional partner to leave them alone	

Code & Description	
COST-BENEFIT	*Functional partner's motivation for use of specific strategy influenced by their beliefs about the cost of a certain behavior in relation to its benefits*
Examples	
• Functional partner determines the risk of afflicted partner not speaking to them is worth it because nothing else has worked (e.g., "what do I have to lose?") • Functional partner determines they can handle the emotional exhaustion of being a non-judgmental confidant because it allows them to remain in contact with the afflicted partner	
PERCEIVED ROLE	*Functional partner's use of specific strategy influenced by their perceived role in their relationship*
Examples	
• Functional partner functions as a "sounding board" • Functional partner function as the "alarm system" for the broader social network • Functional partner as the supportive, non-judgmental person, while others in the broader social network are the punishers	
FUNCTIONAL-AFFLICTED RELATIONSHIP DYNAMIC	
Code & Description	
ONE-SIDED	*Afflicted partner's needs are the focus of the relationship, regardless of what is happening in the functional partner's life*
Examples	
• Functional partner knows everything about the afflicted partner's life, but afflicted partner knows very little about theirs • Afflicted partner is focused only on their own immediate needs	
POWERLESSNESS	*Functional partner feels powerless*
Examples	
• Functional partner feels their efforts are pointless • Functional partner feels the abusive partner has all of the power	
INTIMACY DEEPENS	*Functional partner experiences a deep level of intimacy with the afflicted partner*
Examples	
• Functional partner engages in conversations about intimate things afflicted partner would have never shared before (sex, etc.) • Functional partner is the one person the afflicted partner trusts	

Code & Description	
NEEDED	*Functional partner feels needed by the afflicted partner*
Examples	
• Afflicted partner "has no one else"	
ENMESHMENT	*Functional partner identifies as sharing the afflicted partner's needs and/or experiences*
Examples	
• Functional partner identifying with the behavior or decisions of the afflicted partner • Use of "we" when referring to a decision made by the afflicted partner	
DIFFERENTIATION	*Functional partner differentiates themselves from the afflicted partner's needs and/or experiences*
Examples	
• "It's not my responsibility" • Functional partner separating themselves from the behavior or decisions of the afflicted partner	
NETWORK COMMUNICATION DYNAMIC	
Code & Description	
INCONSISTENT	*Members of the afflicted partner's broader social network are communicating differing or conflicting messages to the afflicted partner*
Examples	
• Functional partner's communication to afflicted partner uses punishing strategy while other members of broader social network utilize different strategies • Functional partner's communication to afflicted partner uses reinforcing strategy while other members of broader social network utilize different strategies • Functional partner's communication to afflicted partner uses reinforcing alternatives strategy while other members of broader social network utilize different strategies	
COORDINATED	*Members of the broader social network are communicating similar messages to the afflicted partner*
Example	
• Functional partner and broader social network coordinate use of consistent punishing strategies in communication with the afflicted partner • Functional partner and broader social network coordinate use of consistent reinforcing strategies in communication with the afflicted partner • Functional partner and broader social network coordinate use of consistent reinforcing alternatives strategies in communication with the afflicted partner	

References

Adkins, K. S., & Kamp Dush, C. M. (2010). The mental health of mothers in and after violent and controlling unions. *Social Science Research*, *39*(6), 925–937.

Ali, P. A., Dhingra, K., & McGarry, J. (2016). A literature review of intimate partner violence and its classifications. *Aggression and Violent Behavior*, *31*, 16–25. https://doi.org/10.1016/j.avb.2016.06.008

Anderson, D. K., & Saunders, D. G. (2003). Leaving an abusive partner: An empirical review of predictors, the process of leaving, and psychological well-being. *Trauma, Violence, & Abuse*, *4*(2), 163–191. https://doi.org/10.1177/1524838002250769

Ansara, D. L., & Hindin, M. J. (2010). Formal and informal help-seeking associated with women's and men's experiences of intimate partner violence in Canada. *Social Science & Medicine*, *70*(7), 1011–1018.

Ashley, O. S., & Foshee, V. A. (2005). Adolescent help-seeking for dating violence: Prevalence, sociodemographic correlates, and sources of help. *Journal of Adolescent Health*, *36*(1), 25–31. https://doi.org/10.1016/j.jadohealth.2003.12.014

Baly, A. R. (2010). Leaving abusive relationships: Constructions of self and situation by abused women. *Journal of Interpersonal Violence*, *25*(12), 2297–2315. https://doi.org/10.1177/0886260509354885

Barnett, O. W. (2001). Why battered women do not leave, part 2: External inhibiting factors - social support and internal inhibiting factors. *Trauma, Violence, & Abuse*, *2*(1), 3–35. https://doi.org/10.1177/1524838001002001001

Barrett, B. J., & St. Pierre, M. (2011). Variations in women's help seeking in response to intimate partner violence: Findings from a canadian population-based study. *Violence Against Women*, *17*(1), 47–70. https://doi.org/10.1177/1077801210394273

Bauserman, S. A. K., & Arias, I. (1992). Relationships among marital investment, marital satisfaction, and marital commitment in domestically victimized and nonvictimized wives. *Violence and Victims*, *7*(4), 287–296.

Baxter, L. A. (2010). *Voicing relationships: A dialogic perspective*. Chicago: SAGE Publications.

Beck, C., & Raghavan, C. (2010). Intimate partner abuse screening in custody mediation: The importance of assessing coercive control. *Family Court Review*, *48*(3), 555–565.

Bell, M. E., Goodman, L. A., & Dutton, M. A. (2007). The dynamics of staying and leaving: Implications for battered women's Emotional well-being and experiences of violence at the end of a year. *Journal of Family Violence*, *22*(6), 413–428. https://doi.org/10.1007/s10896-007-9096-9

Bensley, L., Eenwyk, J., Simmons, K. W., Van Eenwyk, J., & Simmons, K. W. (2003). Childhood family violence history and women's risk for intimate partner violence and poor health. *American Journal of Preventive Medicine*, *25*(1), 38–44. https://doi.org/10.1016/S0749-3797(03)00094-1

Black, B. M., Tolman, R. M., Callahan, M., Saunders, D. G., & Weisz, A. N. (2008). When will adolescents tell someone about dating violence victimization? *Violence Against Women*, *14*(7), 741–758. https://doi.org/10.1177/1077801208320248

Bosch, K., & Bergen, M. B. (2006). The influence of supportive and nonsupportive persons in helping rural women in abusive partner relationships become free from abuse. *Journal of Family Violence*, *21*(5), 311–320. https://doi.org/10.1016/j.energy.2017.05.081

Bowen, G. A. (2006). Grounded theory and sensitizing concepts. *International Journal of Qualitative Methods*, *5*(3), 12–23. https://doi.org/10.1177/160940690600500304

Britton, M., Haddad, S., & Derrick, J. L. (2019). Perceived partner responsiveness predicts smoking cessation in single-smoker couples. *Addictive Behaviors*, *88*, 122–128. https://doi.org/10.1016/j.addbeh.2018.08.026

Burke, J. G., Gielen, A. C., McDonnell, K. A., O'Campo, P., & Maman, S. (2001). The process of ending abuse in intimate relationships: A qualitative exploration of the transtheoretical model. *Violence Against Woman*, *7*(10), 1144–1163. https://doi.org/10.1177/10778010122183784

Bybee, D., & Sullivan, C. M. (2005). Predicting re-victimization of battered women 3 years after exiting a shelter program. *American Journal of Community Psychology*, *36*(2). https://doi.org/10.1007/s10464-005-6234-5

Charmaz, K. (2016). The power of stories and the potential of theorizing for social justice studies. In N. K. Denzin & M. D. Giardina (Eds.), *Qualitative Inquiry Through a Critical Lens* (pp. 41–56). https://doi.org/10.4324/9781315545943

Clarke, A. E. (2005). *Situational analysis: Grounded theory after the postmodern turn*. Thousand Oaks, CA, CA: Sage.

Coker, A. L., Watkins, K. W., Smith, P. H., & Brandt, H. M. (2003). Social support reduces the impact of partner violence on health: Application of structural equation models. *Preventive Medicine*, *37*(3), 259–267. https://doi.org/10.1016/S0091-7435(03)00122-1

Copp, J. E., Giordano, P. C., Longmore, M. A., & Manning, W. D. (2015). Stay-or-leave decision making in nonviolent and violent dating relationships. *Violence and Victims*, *30*(4), 581–599. https://doi.org/10.1891/0886-6708.VV-D-13-00176

Cutrona, C. E., & Russell, D. W. (1990). Type of social support and specific stress: Toward a theory of optimal matching. In B. R. Sarason, I. G. Sarason, & G. R. Pierce (Eds.), *Social support: An interactional view* (pp. 319–366). New York: Wiley.

Cutrona, C. E., & Suhr, J. A. (1992). Controllability of stressful events and satisfaction with spouse support behaviors. *Communication Research*, *19*(2), 154–174.

Dalgleish Hazlett, A. (2019). *Conversations about abusive relationships: An application of Inconsistent Nurturing as Control Theory*.

Derrick, J. L., Wittkower, L. D., & Pierce, J. D. (2019). Committed relationships and substance use: recent findings and future directions. *Current Opinion in Psychology*, *30*, 74–79. https://doi.org/10.1016/j.copsyc.2019.03.002

Douglas, E. M., & Hines, D. A. (2011). The helpseeking experiences of men who sustain intimate partner violence: An overlooked population and implications for practice. *Springer*, *26*, 473–485. https://doi.org/10.1007/s10896-011-9382-4

Duggan, A. (2007). Sex differences in communicative attempts to curtail depression: An

inconsistent nurturing as control perspective. *Western Journal of Communication*, *71*(2), 114–135. https://doi.org/10.1080/10570310701354492

Duggan, A., Dailey, R., & Le Poire, B. A. (2008). Reinforcement and punishment of substance abuse during ongoing interactions: A conversational test of inconsistent nurturing as control theory. *Journal of Health Communication*, *13*(5), 417–433. https://doi.org/10.1080/10810730802198722

Duggan, A., & Kilmartin, B. (2016). Parental and sibling behaviors that encourage daughters' continued eating disorders: An inconsistent nurturing as control perspective. In *The darker side of family communication: The harmful, the morally suspect, and the socially inappropriate* (pp. 49–68). Peter Lang Publishing, Inc.

Duggan, A., & Le Poire, B. A. (2006). One down, two involved: An application and extension of inconsistent nurturing as control theory to couples including one depressed individual. *Communication Monographs*, *73*(4), 379–405. https://doi.org/10.1080/03637750601024149

Duggan, A., Le Poire, B. A., & Addis, K. (2006). A qualitative analysis of communicative strategies used by partners of substance abusers and depressed individuals during recovery: Implications for inconsistent. In *Applied Interpersonal Communication Matters: Family, Health, & Community Relations* (pp. 151–174).

Duggan, A., Le Poire, B. A., Prescott, M. E., & Baham, C. S. (2009). Understanding the helper: The role of codependency in health care and health care outcomes. In D. Brashers & D. Goldsmith (Eds.), *Communicating to Manage Health and Illness* (pp.

271–299). New York: Routledge/Taylor Francis.

Dunham, K., & Senn, C. Y. (2000). Minimizing negative experiences of women's disclosure of partner abuse. *Journal of Interpersonal Violence*, *15*(3), 251–261. https://doi.org/10.1177/088626000015003002

Dutton, D. G., & Painter, S. L. (1993). Emotional attachments in abusive relationships: A test of traumatic bonding theory. *Violence and Victims*, *8*(2), 105.

Edwards, K. M., Dardis, C. M., & Gidycz, C. A. (2012). Women's disclosure of dating violence: A mixed methodological study. *Feminism and Psychology*, *22*(4), 507–517. https://doi.org/10.1177/0959353511422280

Enander, V., & Holmberg, C. (2008). Why does she leave? The leaving process (es) of battered women. *Health Care for Women International*, *29*(3), 200–226.

Etcheverry, P. E., & Agnew, C. R. (2004). Subjective norms and the prediction of romantic relationship state and fate. *Personal Relationships*, *11*(4), 409–428. https://doi.org/10.1111/j.1475-6811.2004.00090.x

Etcheverry, P. E., Le, B., & Charania, M. R. (2008). Perceived versus reported social referent approval and romantic relationship commitment and persistence. *Personal Relationships*, *15*(3), 281–295. https://doi.org/10.1111/j.1475-6811.2008.00199.x

Farrow, F. (1997). *Building community partnerships for child protection: Getting from here to there*. Washington, DC.

Ferraro, K. J., & Johnson, J. M. (1983). How women experience battering: The process of victimization. *Social Problems*, *30*(3), 325–339.

Fishbein, M., & Ajzen, I. (1975). An introduction to theory and research. In *Belief, attitude, Intention, and Behavior: An introduction to theory and research*. https://doi.org/10.2307/2065853

Flicker, S. M., Cerulli, C., Zhao, X., Tang, W., Watts, A., Xia, Y., & Talbot, N. L. (2011). Concomitant forms of abuse and help-seeking behavior among white, african american, and latina women who experience intimate partner violence. *Violence Against Women*, *17*(8), 1067–1085. https://doi.org/10.1177/1077801211414846

Frankland, A., & Brown, J. (2014). Coercive control in same-sex intimate partner violence. *Journal of Family Violence*, *29*(1), 15–22. https://doi.org/10.1007/s10896-013-9558-1

Frey, L., Botan, C., Friedman, P., & Kreps, G. (1992). *Interpreting communication research: A case study approach*. Prentice Hall International.

Geertz, C. (1973). *The interpretation of cultures: Selected essays*. New York: Basic Books.

Glaser, B., & Strauss, A. (1967). *The discovery of grounded theory; strategies for qualitative research [by] Barney G. Glaser and Anselm L. Strauss*. Aldine.

Glass, N., Manganello, J., & Campbell, J. (2004). Risk for intimate partner femicide in violent relationships. In *DV Report, 9(2), 1.*

Glowacki, E. M. (2013). *Examining individual differences as predictors of reinforcement and punishment behaviors within romantic couples dealing with substance use : An application of Inconsistent Nurturing as Control Theory APPROVED BY SUPERVISING COMMITTEE :*

Glowacki, E. M. (2016). Communication about problematic drinking between young adults and their parents: An application of inconsistent nurturing as control theory. *Health Communication*, *31*(9), 1135–1144. https://doi.org/10.1080/10410236.2015.1045578

Glowacki, E. M. (2017). Examining sibling communication about problematic drinking: An application of inconsistent nurturing as control theory. *Journal of Family Communication*, *17*(1), 65–87. https://doi.org/10.1080/15267431.2016.1251919

Glowacki, E. M., & Donovan, E. E. (2018). Predicting reinforcement and punishment behaviors in college students coping with substance misuse: An application of inconsistent nurturing as control theory. *Communication Quarterly*, *66*(5), 541–556. https://doi.org/10.1080/01463373.2018.1466345

Goffman, E. (1967). *Interaction ritual: Essays on face-to-face interaction.* Retrieved from https://psycnet.apa.org/record/1967-35005-000

Goldsmith, D. J. (2004). *Communicating social support.* Retrieved from https://psycnet.apa.org/record/2005-01108-000

Gondolf, E. W., & Fisher, E. R. (1988). *Battered women as survivors: An alternative to treating learned helplessness.* Retrieved from https://psycnet.apa.org/record/1988-98440-000

Goodkind, J. R., Gillum, T. L., Bybee, D. I., & Sullivan, C. M. (2003). The impact of family and friends' reactions on the well-being of women with abusive partners. *Violence Against Women*, *9*(3), 347–373. https://doi.org/10.1177/1077801202250083

Goodman, L. A., & Smyth, K. F. (2011). A call for a social network-oriented approach to

services for survivors of intimate partner violence. *Psychology of Violence*, *1*(2), 79–92. https://doi.org/10.1037/a0022977

Goodman, L., Dutton, M. A., Vankos, N., & Weinfurt, K. (2005, March). Women's resources and use of strategies as risk and protective factors for reabuse over time. *Violence Against Women*, Vol. 11, pp. 311–336. https://doi.org/10.1177/1077801204273297

Goodman, L., Dutton, M. A., Weinfurt, K., & Cook, S. (2003). The intimate partner violence strategies index. Development and application. *Violence Against Women*, *9*(2), 163–186. https://doi.org/10.1177/1077801202239004

Greenfeld, L. A. (1998). *Violence by intimates: Analysis of data on crimes by current or former spouses, boyfriends and girlfriends*.

Gregory, A. C., Williamson, E., & Feder, G. (2017). The impact on informal supporters of domestic violence survivors: A systematic literature review. *Trauma, Violence, and Abuse*, *18*(5), 562–580. https://doi.org/10.1177/1524838016641919

Handsel, V., Ritter, K., Moore, T. M., & Rhatigan, D. L. (2012). *The stage of change in relationship status questionnaire (SOCRS).*

Hardesty, J. L., Oswald, R. F., Khaw, L., Fonseca, C., & Chung, G. H. (2008). Lesbian mothering in the context of intimate partner violence. *Journal of Lesbian Studies*, *12*(2–3), 191–210.

Hays, R. B. (1985). A longitudinal study of friendship development. *Journal of Personality and Social Psychology*, *48*(4), 909–924.

Herman, J. (2015). *Trauma and recovery: The aftermath of violence--from domestic abuse to political terror*.

Hobart, M. (2002). *'"Tell the world what happened to me."' Findings and recommendations from the Washington State domestic violence fatality review*. Washington, DC.

Horton, A. L., & Johnson, B. L. (1993). Profile and strategies of women who have ended abuse. *Families in Society*, *74*(8), 481–492.

Insetta, E. R., Akers, A. Y., Miller, E., Yonas, M. A., Burke, J. G., Hintz, L., & Chang, J. C. (2015). Intimate partner violence victims as mothers: Their messages and strategies for communicating with children to break the cycle of violence. *Journal of Interpersonal Violence*, *30*(4), 703–724. https://doi.org/10.1177/0886260514535264

James, S., Herman, J., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). *The report of the 2015 US transgender survey*. Retrieved from https://ncvc.dspacedirect.org/handle/20.500.11990/1299

Johnson, M. P. (2008). *A typology of domestic violence: Intimate terrorism, violent resistance, and situational couple violence*. Northeastern University Press.

Johnson, M. P. (2010). Langhinrichsen-Rolling's confirmation of the feminist analysis of intimate partner violence: Comment on "controversies involving gender and intimate partner violence in the United States." *Sex Roles*, *62*(3–4), 212–219. https://doi.org/10.1007/s11199-009-9697-2

Johnson, M. P. (2017). A Personal Social History of a Typology of Intimate Partner

Violence. *Journal of Family Theory and Review*, *9*(2), 150–164. https://doi.org/10.1111/jftr.12187

Johnson, M. P., & Leone, J. M. (2005). The differential effects of intimate terrorism and situational couple violence. *Journal of Family Issues*, *26*(3), 322–349. https://doi.org/10.1177/0192513X04270345

Jose, A., & O'Leary, K. (2009). *Prevalence of partner aggression in representative and clinic samples.* Retrieved from https://psycnet.apa.org/record/2009-08048-001

Kaukinen, C. (2004). The help-seeking strategies of female violent-crime victims: The direct and conditional effects of race and the victim-offender relationship. *Journal of Interpersonal Violence*, *19*(9), 967–990. https://doi.org/10.1177/0886260504268000

Kelly, J. B., & Johnson, M. P. (2008). Differentiation among types of intimate partner ciolence: Research update and implications for interventions. *Family Court Review*, *46*(3), 476–499. https://doi.org/10.1111/j.1744-1617.2008.00215.x

Kelly, L., Bindel, J., Burton, S., Butterworth, D., & Cook, K. (1999). *Domestic violence matters: An evaluation of a development project*. Retrieved from https://www.ncjrs.gov/App/Publications/abstract.aspx?ID=179638">

Klein, R. (2012). *Responding to intimate violence against women: The role of informal networks*. Cambridge University Press.

Kvale, S. (1995). The social construction of validity. *Qualitative Inquiry*, *1*(1), 19–40. https://doi.org/10.1177/107780049500100103

Lanier, C., & Maume, M. O. (2009). Intimate partner violence and social isolation across

the rural/urban divide. *Violence Against Women*, *15*(11), 1311–1330. https://doi.org/10.1177/1077801209346711

Latta, R. E. (2008). *Struggling to define my role: The experience of network members who intervened in intimate partner violence*. Boston College.

Latta, R. E., & Goodman, L. (2011). Intervening in partner violence against women: A grounded theory exploration of informal network members' experiences. *The Counseling Psychologist*, *39*(7), 973–1023. https://doi.org/10.1177/0011000011398504

Le Poire, B. A. (1992). Does the codependent encourage substance-dependent behavior? paradoxical injunctions in the codependent relationship. *Substance Use and Misuse*, *27*(12), 1465–1474. https://doi.org/10.3109/10826089209047363

Le Poire, B. A. (1995). Inconsistent nurturing as control theory: Implications for communication-based research and treatment programs. *Journal of Applied Communication Research*, *23*(1), 60–74. https://doi.org/10.1080/00909889509365414

Le Poire, B. A., Hallett, J. S., & Erlandson, K. T. (2000). An initial test of inconsistent nurturing as control theory: How partners of drug abusers assist their partners' sobriety. *Human Communication Research*, *26*(3), 432–457.

Lehmann, P., Simmons, C. A., & Pillai, V. K. (2012). The validation of the checklist of controlling behaviors (CCB): Assessing coercive control in abusive relationships. *Violence Against Women*, *18*(8), 913–933.

https://doi.org/10.1177/1077801212456522

Liang, B., Goodman, L., Tummala-Narra, P., & Weintraub, S. (2005). A theoretical framework for understanding help-seeking processes among survivors of intimate partner violence. *American Journal of Community Psychology*, *36*(1–2), 71–84. https://doi.org/10.1007/s10464-005-6233-6

Mahlstedt, D., & Keeny, L. (1993). Female survivors of dating violence and their social networks. *Dating Violence and Social Networks*, *3*(3), 319–333.

McClennen, J. C., Summers, A. B., & Vaughan, C. (2002). Gay men's domestic violence: Dynamics, help-seeking behaviors, and correlates. *Journal of Gay and Lesbian Social Services*, *14*(1), 23–49. https://doi.org/10.1300/J041v14n01_02

McNamara, P. M. (2008). Changed forever: Friends reflect on the impact of a woman's death through intimate partner homicide. *Journal of Family Studies*, *14*(2–3), 198–216. https://doi.org/10.5172/jfs.327.14.2-3.198

Mennicke, A. (2019). Expanding and validating a typology of intimate partner violence: Intersections of violence and control within relationships. *Violence Against Women*, *25*(4), 379–400. https://doi.org/10.1177/1077801218780362

Merrill, G. S., & Wolfe, V. A. (2000). Battered gay men: An exploration of abuse, help seeking, and why they stay. *Journal of Homosexuality*, *39*(2), 1–30. https://doi.org/10.1300/J082v39n02_01

Merritt-Gray, M., & Wuest, J. (1995). Counteracting abuse and breaking free: The process of leaving revealed through women's voices. *Health Care for Women International*,

16(5), 399–412. https://doi.org/10.1080/07399339509516194

Metts, S., Sprecher, S., Cupach, W. R., Montgomery, B. M., & Duck, S. (1991). Retrospective self-reports. In *Studying interpersonal interaction* (pp. 162–178).

Mitchell, R. E., & Hodson, C. A. (1983). Coping with domestic violence: Social support and psychological health among battered women. *American Journal of Community Psychology*, *11*(6), 629–654. https://doi.org/10.1016/0010-4485(87)90162-X

Moe, A. M. (2007). Silenced coices and structured survival — Violence against women. *Violence Against Women*, *13*(7), 676–699. https://doi.org/10.1177/1077801207302041

Molidor, C., & Tolman, R. M. (1998). Gender and contextual factors in adolescent dating violence. *Violence Against Woman*, *4*(2), 180–194. https://doi.org/10.1177/1077801298004002004

Moss, V. A., Pitula, C. R., Campbell, J. C., & Halstead, L. (1997). The experience of terminating an abusive relationship from an anglo and african american perspective: A qualitative descriptive study. *Issues in Mental Health Nursing*, *18*(5), 433–454. https://doi.org/10.3109/01612849709009423

Murray, C. E., & Mobley, A. K. (2009). Empirical research about same-sex intimate partner violence: A methodological review. *Journal of Homosexuality*, *56*(3), 361–386. https://doi.org/10.1080/00918360902728848

Myhill, A., & Hohl, K. (2019). The "golden thread": Coercive control and risk assessment for domestic violence. *Journal of Interpersonal Violence*, *34*(22), 4477–4497.

https://doi.org/10.1177/0886260516675464

Pachucki, M. A., Jacques, P. F., & Christakis, N. A. (2011). Social network concordance in food choice among spouses, friends, and siblings. *American Journal of Public Health*, *101*(11), 2170–2177. https://doi.org/10.2105/AJPH.2011.300282

Panchanadeswaran, S., & McCloskey, L. A. (2007). Predicting the timing of women's departure from abusive relationships. *Journal of Interpersonal Violence*, *22*(1), 50–65. https://doi.org/10.1177/0886260506294996

Peled, E., Gueta, K., & Sander-Almoznino, N. (2016). The experience of mothers exposed to the abuse of their daughters by an intimate partner: "There Is no definition for it." *Violence Against Women*, *22*(13), 1577–1596. https://doi.org/10.1177/1077801215627512

Plichta, S. B. (2004). Intimate partner violence and physical health consequences: Policy and practice implications. *Journal of Interpersonal Violence*, *19*(11), 1296–1323. https://doi.org/10.1177/0886260504269685

Plichta, S. B., & Falik, M. (2001). Prevalence of violence and its implications for women's health. *Women's Health Issues*, *11*(3), 244–258. https://doi.org/10.1016/S1049-3867(01)00085-8

Prescott, M. E., & Le Poire, B. A. (2002). Eating disorders and mother-daughter communication: A test of inconsistent nurturing as control theory. *Journal of Family Communication*, *2*(2), 59–78. Retrieved from https://www.tandfonline.com/action/journalInformation?journalCode=hjfc20

Prochaska, J. O., & Velicer, W. F. (1997). The transtheoretical model of health behavior change. *American Journal of Health Promotion*, *12*(1), 38–48. https://doi.org/10.4278/0890-1171-12.1.38

Reisenhofer, S., & Taft, A. (2013). Women's journey to safety- the transtheoretical model in clinical practice when working with women experiencing intimate partner violence: A scientific review and clinical guidance. *Patient Education and Counseling*, *93*(3), 536–548.

Renzetti, C. M. (1988). Violence in lesbian relationships: A preliminary analysis of causal factors. *Journal of Interpersonal Violence*, *3*(4), 381–399. https://doi.org/10.1177/088626088003004003

Renzetti, C. M. (1989). Building a second closet : third party responses to victims of lesbian partner abuse. *Family Relations*, *38*(2), 157–163.

Rhatigan, D. L., & Axsom, D. K. (2006). Using the investment model to understand battered women's commitment to abusive relationships. *Journal of Family Violence*, *21*(2), 153–162. https://doi.org/10.1007/s10896-005-9013-z

Rhodes, N. R., & McKenzie, E. B. (1998). Why do battered women stay?: Three decades of research. *Aggression and Violent Behavior*, *3*(4), 391–406.

Riger, S., Raja, S., & Camacho, J. (2002). The radiating impact of intimate partner violence. *Journal of Interpersonal Violence*, *17*(2), 184–205. https://doi.org/10.1177/0886260502017002005

Rose, L. E., Campbell, J., & Kub, J. (2000). The role of social support and family

relationships in women's responses to battering. *Health Care for Women International*, *21*(1), 27–39. https://doi.org/10.1080/073993300245384

Rubin, H., & Rubin, I. (2005). *Qualitative interviewing: The art of hearing data* (2nd ed.). 2nd ed. https://doi.org/10.4135/9781452226651

Rusbult, C. E., & Martz, J. M. (1995). Remaining in an abusive relationship: An investment model analysis of nonvoluntary dependence. *Personality and Social Psychology Bulletin*, *21*(6), 558–571. https://doi.org/10.1177/0146167295216002

Salari, S. (2007). Patterns of intimate partner homicide suicide in later life: Strategies for prevention. *Clinical Interventions in Aging*, *2*(3), 441–452. https://doi.org/cia-2-441 [pii]

Sandberg, L. J. (2016). "Love the kin you're in?": Kin network responses to women and children experiencing intimate partner violence. *Feminism and Psychology*, *26*(4), 444–463. https://doi.org/10.1177/0959353516652917

Scheffer Lindgren, M., & Renck, B. (2008). Intimate partner violence and the leaving process: Interviews with abused women. *International Journal of Qualitative Studies on Health and Well-Being*, *3*(2), 113–124. https://doi.org/10.1080/17482620801945805

Shorey, R. C., Tirone, V., Nathanson, A. M., Handsel, V. A., & Rhatigan, D. L. (2013). A preliminary investigation of the influence of subjective norms and relationship commitment on stages of change in female intimate partner violence victims. *Journal of Interpersonal Violence*, *28*(3), 621–642.

https://doi.org/10.1177/0886260512455520

Short, L. M., McMahon, P. M., Chervin, D. D., Shelley, G. A., Lezin, N., Sloop, K. S., & Dawkins, N. (2000). Survivors' identification of protective factors and early warning signs for intimate partner violence. *Violence Against Woman*, *6*(3), 272–285. https://doi.org/10.1177/10778010022181840

Sigurvinsdottir, R., Riger, S., & Ullman, S. E. (2016). The impact of disclosure of intimate partner violence on friends. *Journal of Interpersonal Violence*, *31*(18), 2940–2957. https://doi.org/10.1177/0886260515584334

Skinner, B. F. (1974). *About behaviorism*. New York: Knopf.

Smith, S. G., Chen, J., Basile, K. C., Gilbert, L. K., Merrick, M. T., Patel, N., … Jain, A. (2017). *The national intimate partner and sexual violence survey (NISVS): 2010-2012 state report*. Retrieved from https://ncvc.dspacedirect.org/handle/20.500.11990/319

Stark, E. (2009). *Coercive control: How men entrap women in personal life*. Oxford University Press.

Stiles-Shields, C., & Carroll, R. A. (2015). Same-sex domestic violence: Prevalence, unique aspects, and clinical Implications. *Journal of Sex and Marital Therapy*, *41*(6), 636–648. https://doi.org/10.1080/0092623X.2014.958792

Strube, M. J. (1988). The decision to leave an abusive relationship: Empirical evidence and theoretical issues. *Psychological Bulletin*, *104*(2), 236–250.

Strube, M. J., & Barbour, L. S. (1983). The decision to leave an abusive relationship: Economic dependence and psychological commitment. *Journal of Marriage and*

Family, *45*(4), 785–793. Retrieved from https://www.jstor.org/stable/351791?casa_token=flFCufMh_tsAAAAA:JCsKIZh2lG1TWDJCSWVO9fhlxKBEvfYfMFqKxBgB_1Us4gUZ57ybVJPeaO2yhW-Cn2Rf45ng7v--a8yJvI0WC61DfCuIirWu4Q8UfcfnrbapDgyfkvc

Swanberg, J. E., & Macke, C. (2006). Intimate partner violence and the work place: Consequences and disclosure. *Affilia: Journal of Women and Social Work*, *21*(4), 391–406.

Sylaska, K. M., & Edwards, K. M. (2014). Disclosure of Intimate Partner Violence to Informal Social Support Network Members: A Review of the Literature. *Trauma, Violence, and Abuse*, *15*(1), 3–21. https://doi.org/10.1177/1524838013496335

Tracy, S. J. (2018). A phronetic iterative approach to data analysis in qualitative research. *Journal of Qualitative Research*, *19*(2), 61–76.

Tracy, S. J. (2020). *Qualitative research methods: Collecting evidence, crafting analysis, communicating impact* (2nd ed.). Hoboken, New Jersey: John Wiley & Sons.

Trotter, J. L., & Allen, N. E. (2009). The good, the bad, and the ugly: Domestic violence survivors' experiences with their informal social networks. *American Journal of Community Psychology*, *43*(3–4), 221–231. https://doi.org/10.1007/s10464-009-9232-1

Truman-Schram, D. M., Cann, A., Calhoun, L., & Vanwallendael, L. (2000). Leaving an abusive dating relationship : An investment model ... *Journal of Social and Clinical Psychology*, *19*(2), 161–183.

Turell, S. C., & Herrmann, M. M. (2008). “Family” support for family violence: Exploring community support systems for lesbian and bisexual women who gave experienced abuse. *Journal of Lesbian Studies*, *12*(2–3), 211–224. https://doi.org/10.1080/10894160802161372

Uchino, B. N., Holt-Lunstad, J., Smith, T. W., & Bloor, L. (2004). Heterogeneity in social networks: A comparison of different models linking relationships to psychological outcomes. *Journal of Social and Clinical Psychology*, *23*(2), 123–139. https://doi.org/10.1521/jscp.23.2.123.31014

Ulrich, Y. C. (1991). Women’s reasons for leaving abusive spouses. *Health Care for Women International*, *12*(4), 465–473. https://doi.org/10.1080/07399339109515970

Walters, M. L. (2011). Straighten up and act like a lady: A qualitative study of lesbian survivors of intimate partner violence. *Journal of Gay & Lesbian Social Services*, *23*(2), 250–270. https://doi.org/10.1080/10538720.2011.559148

Weisz, A. N., Tolman, R. M., Callahan, M. R., Saunders, D. G., & Black, B. M. (2007). Informal helpers’ responses when adolescents tell them about dating violence or romantic relationship problems. *Journal of Adolescence*, *30*(5), 853–868. https://doi.org/10.1016/j.adolescence.2006.09.004

Wilcox, P. (2000). “Me mother’s bank and me nanan’s, you know, support!”: Women who left domestic violence in England and issues of informal support. *Women’s Studies International Forum*, *23*(1), 35–47.

Wolf, M. E., Holt, V. L., Kernic, M. A., & Rivara, F. P. (2000). Who gets protection orders

for intimate partner violence? *American Journal of Preventive Medicine*, *19*(4), 286–291. https://doi.org/10.1016/S0749-3797(00)00235-X

Wright, P. J. (2008). Sexual coaddiction: A new context for inconsistent nurturing as control theory. *Sexual Addiction and Compulsivity*, *15*(1), 1–13. https://doi.org/10.1080/10720160701879058

Wright, P. J. (2011). Communicative dynamics and recovery from sexual addiction: An inconsistent nurturing as control theory analysis. *Communication Monographs*, *59*(4), 395–414. https://doi.org/10.1080/01463373.2011.597284

Zapor, H., Wolford-Clevenger, C., & Johnson, D. M. (2018). The association between social support and stages of change in survivors of intimate partner violence. *Journal of Interpersonal Violence*, *33*(7), 1051–1070. https://doi.org/10.1177/0886260515614282